

Ninety-sixth Annual Report
of the
Massachusetts Charitable
Eye and Ear Infirmary

For the Year
1921

THE MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

233 Charles Street, Corner Fruit Street, Boston, Mass.

OUT-PATIENT DEPARTMENT

The Out-Patient Department is open daily, excepting Sundays and legal holidays, from 8.30 to 10.30 A.M., for examination and treatment of all poor persons afflicted with disease of the eye or ear. Persons needing treatment in the hospital wards will be advised accordingly. Medicines and glasses are furnished at the Infirmary, but neither prescription nor advice will be sent by mail, express, or messenger.

HOSPITAL

Persons recommended for admission to the hospital wards should apply at the Superintendent's office before 1 P.M. *on weekdays only, excepting legal holidays.*

Accident and emergency cases admitted at any time.

All communications about the Infirmary or any inmate must be addressed to the Superintendent, and should contain the full name of the patient as well as the name and address of the writer.

Persons admitted to the wards as in-patients will be charged for board at the rate of twenty-one dollars per week, payable in advance, unless some special arrangement is made by the Superintendent. No reduction in rate of board made to those residing outside the Commonwealth of Massachusetts.

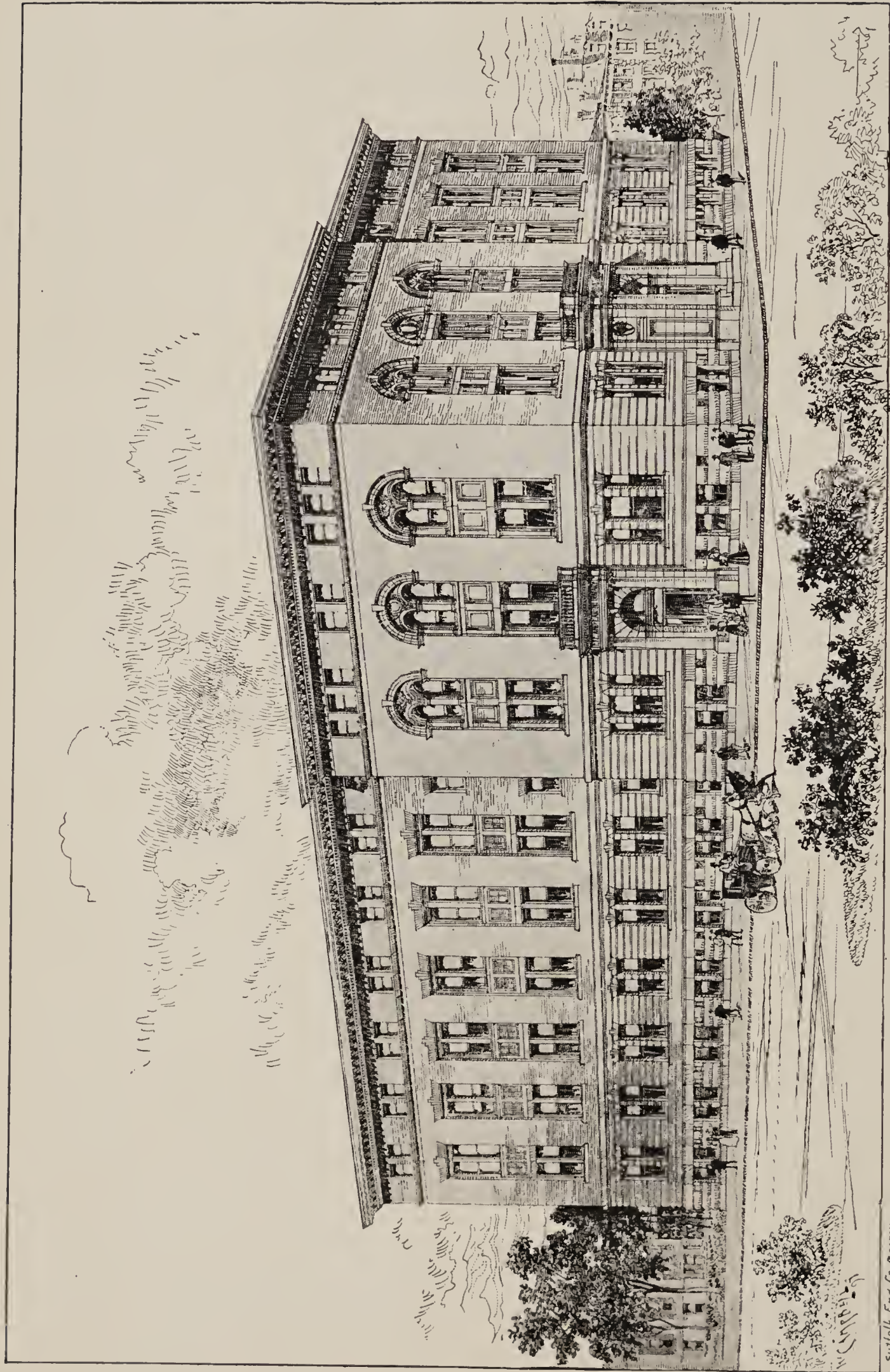
Visitors will be admitted to see patients from 1 to 2 o'clock in the afternoon, and but one visitor a day is allowed to each patient over seven years of age. Children under seven years of age may be visited on Sundays and legal holidays from 1 to 2 P.M., when two visitors are permitted. Visitors may be excluded at any time.

On Sundays and holidays two visitors are allowed each patient.

The Infirmary reserves the right to investigate every case.



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MAIN BUILDING, MARCH, 1899

Ninety-sixth Annual Report
of the
Massachusetts Charitable
Eye and Ear Infirmary
For the Year
1921

BOSTON
GRIFFITH-STILLINGS PRESS
1922

Officers, 1922

Board of Managers, 1921-1922

GEORGE P. GARDNER

Feb. 1, 1887

HENRY PARKMAN

May 2, 1893

WILLIAM D. SOHIER¹.

Jan. 7, 1896

ROBERT HOMANS

May 1, 1900

WILLIAM C. ENDICOTT

Feb. 3, 1903

RUSSELL G. FESSENDEN

Feb. 3, 1903

HERBERT M. SEARS

Dec. 20, 1905

CHARLES P. CURTIS

Feb. 5, 1907

ROBERT H. STEVENSON, Jr.

Feb. 5, 1907

JOHN LAWRENCE¹

Feb. 5, 1907

JAMES DEAN

June 12, 1914

JAMES C. HOWE

June 12, 1914

EDWARD H. BRADFORD, M.D.

Oct. 31, 1918

President

EDWARD H. BRADFORD, M.D.

Secretary

JAMES C. HOWE, 17 Court Street, Boston

Treasurer

HENRY PARKMAN, 53 State Street, Boston

Executive Committee

GEORGE P. GARDNER

HERBERT M. SEARS

JOHN LAWRENCE

Finance Committee

RUSSELL G. FESSENDEN

JAMES DEAN

JAMES C. HOWE

¹Appointed by the Commonwealth.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Visiting Committee

January . . .	MR. FESSENDEN	July . . .	MR. PARKMAN
	MR. SEARS		MR. STEVENSON
February . . .	MR. SEARS	August . . .	MR. STEVENSON
	DR. BRADFORD		MR. HOMANS
March . . .	DR. BRADFORD	September .	MR. HOMANS
	—————		MR. CURTIS
April . . .	—————	October . . .	MR. CURTIS
	MR. HOWE		MR. ENDICOTT
May . . .	MR. HOWE	November .	MR. ENDICOTT
	MR. DEAN		MR. GARDNER
June . . .	MR. DEAN	December .	MR. GARDNER
	MR. PARKMAN		MR. FESSENDEN

Ladies' Visiting Committee

MRS. RICHARD C. CURTIS	MRS. SAMUEL ELIOT
MISS ROSANNA D. FISKE	MISS CLARA B. WINTHROP
MISS CORNELIA R. FISKE	MRS. HAROLD PEABODY
MRS. REGINALD FOSTER	MISS MILDRED KENNEDY
MISS TERESA L. MERRIAM	MRS. JAMES F. NORRIS
MRS. THOMAS P. CURTIS	MISS HARRIET H. BRAYTON
MISS ELLEN CURTIS	MRS. WILLIAM S. FORBES
MRS. BARTLETT HARWOOD	MRS. THOMAS R. MORSE
MISS HELEN MACLEOD	MRS. J. F. FAY
MRS. R. CUSHING HAMLEN	

Executive Officers

Superintendent

FREDERIC A. WASHBURN, M.D.

Assistant Superintendent

SOPHIA B. EASTMAN, R.N.

Surgical Board

Consulting Ophthalmic Surgeons

HENRY W. BRADFORD, M.D.	EDWIN E. JACK, M.D.
H. BECKLES CHANDLER, M.D.	FREDERICK E. CHENEY, M.D.
MYLES STANDISH, M.D.	HENRY H. HASKELL, M.D.

OFFICERS, 1922

Consulting Aural Surgeons

J. ORNE GREEN, M.D. EDWARD M. PLUMMER, M.D.
FREDERICK L. JACK, M.D.

Ophthalmic Chiefs of Service

ALEXANDER QUACKENBOSS, M.D. FRED M. SPALDING, M.D.

Aural Chiefs of Service

EUGENE A. CROCKETT, M.D. PHILIP HAMMOND, M.D.

Laryngological Chief of Service

HARRIS P. MOSHER, M.D.

Ophthalmic Surgeons

FREDERICK H. VERHOEFF, M.D. WALTER B. LANCASTER, M.D.
PETER H. THOMPSON, M.D. GEORGE H. RYDER, M.D.
GEORGE S. DERBY, M.D. SAMUEL J. McDONALD, M.D.

Aural Surgeons

D. HAROLD WALKER, M.D. WILLIAM F. KNOWLES, M.D.
HARRIS P. MOSHER, M.D. FRANCIS P. EMERSON, M.D.

Laryngologists

D. CROSBY GREENE, Jr., M.D. HARRY A. BARNES, M.D.

Assistant Ophthalmic Surgeons

W. HOLBROOK LOWELL, M.D. HENRY B. STEVENS, M.D.
EDWARD K. ELLIS, M.D. HUGO B. C. REIMER, M.D.
WILLIAM N. SOUTER, M.D. CLARENCE F. WORTHEN, M.D.
RALPH A. HATCH, M.D. EDWIN B. GOODALL, M.D.
HENRY HAWKINS, M.D. JOHN J. JENNINGS, M.D.
HENRY G. CARROLL, M.D. ROLAND C. MACKENZIE, M.D.

Assistant Aural Surgeons

GEORGE L. TOBEY, M.D. DANA W. DRURY, M.D.
LEON E. WHITE, M.D. JOHN H. BLODGETT, M.D.
CALVIN B. FAUNCE, JR., M.D. D. CAMPBELL SMYTH, M.D.
FREDERICK L. BOGAN, M.D. HARRY P. CAHILL, M.D.
OLIVER A. LOTHROP, M.D.

Associate Laryngologists

FREDERICK E. GARLAND, M.D. D. CAMPBELL SMYTH, M.D.

Ophthalmic Clinical Assistants

BARRY H. BURGESS, M.D. JOSEPH L. DOWLING, M.D.
THOMAS F. CAPELES, M.D. JOHN J. GILBERT, M.D.
MAUD CARVIL, M.D. JOHN J. KERRIGAN, M.D.
HAROLD B. CHANDLER, M.D. PERCY C. PROCTOR, M.D.
ROBERT C. CHENEY, M.D. RALPH H. RUGGLES, M.D.
SAMUEL H. WILKINS, M.D.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Aural Clinical Assistants

NEWTON S. BACON, M.D.	GEORGE H. POIRIER, M.D.
HARRY P. FINCK, M.D.	CHARLES T. PORTER, M.D.
WILLIAM J. HARKINS, M.D.	JOSEPH M. SCANLON, M.D.
JAMES C. KIRBY, M.D.	FRED A. SIMMONS, M.D.
PHILIP N. MELTZER, M.D.	HAROLD G. TOBEY, M.D.
EDWIN A. MESERVE, M.D.	WILLIAM I. WIGGIN, M.D.

Assistant Laryngologists

CALVIN B. FAUNCE, M.D.	WILLIAM J. HARKINS, M.D.
	WILLIAM I. WIGGIN, M.D.

Assistants

JOHN H. BLODGETT, M.D.	GEORGE H. POIRIER, M.D.
EDWARD W. HERMAN, M.D.	CHARLES T. PORTER, M.D.
ISABELLE D. KERR, M.D.	FRED A. SIMMONS, M.D.
JAMES C. KIRBY, M.D.	HAROLD G. TOBEY, M.D.

Dentist

GEORGE H. WRIGHT, D.M.D.

Pathologist

FREDERICK H. VERHOEFF, M.D.

Roentgenologist

A. S. MACMILLAN, M.D.

Consulting Physicians

DAVID L. EDSALL, M.D.	GERALD BLAKE, M.D.
ROGER I. LEE, M.D.	THEODORE J. EASTMAN, M.D.
C. MORTON SMITH, M.D.	HARRY LINENTHAL, M.D.
FREDERICK T. LORD, M.D.	WILLIAM B. ROBBINS, M.D.
JAMES H. MEANS, M.D.	F. GORHAM BRIGHAM, M.D.
	GEORGE R. MINOT, M.D.

Physician to Children

FRITZ B. TALBOT, M.D.

Assistant Physician to Children

RICHARD M. SMITH, M.D.

Assistants in the Care of Children

J. HERBERT YOUNG, M.D.	WILLIAM R. P. EMERSON, M.D.
RICHARD S. EUSTIS, M.D.	WARREN R. SISSON, M.D.

OFFICERS, 1922

Consulting Surgeons

SAMUEL J. MIXTER, M.D.	HUGH WILLIAMS, M.D.
CHARLES A. PORTER, M.D.	LINCOLN DAVIS, M.D.
FRANKLIN G. BALCH, M.D.	EDWARD P. RICHARDSON, M.D.
GEORGE W. W. BREWSTER, M.D.	W. JASON MIXTER, M.D.
ROBERT B. GREENOUGH, M.D.	WYMAN WHITTEMORE, M.D.
DANIEL F. JONES, M.D.	RICHARD H. MILLER, M.D.

Consulting Orthopedic Surgeon

ROBERT B. OSGOOD, M.D.

Consulting Genito-Urinary Surgeon

J. DELLINGER BARNEY, M.D.

Consulting Neurologists

EDWARD W. TAYLOR, M.D.	WALTER E. PAUL, M.D.
	JAMES B. AYER, M.D.

Consulting Dermatologists

CHARLES J. WHITE, M.D.	HARVEY P. TOWLE, M.D.
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Consulting Pathologists

J. HOMER WRIGHT, M.D.	OSCAR RICHARDSON, M.D.
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Consulting Anesthetists

FREEMAN ALLEN, M.D.	ARTHUR M. DODGE, M.D.
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Refractionists

EDWIN B. GOODALL, M.D.	ALFRED C. TRULL, M.D.
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House Staff

Ophthalmic Internes

R. C. WHITNEY, M.D.	H. G. NOYES, M.D.
L. H. WEINHEIMER, M.D.	J. F. TOOT, M.D.
	C. A. HOBERECHT, M.D.

Aural Internes

D. E. S. WISHART, M.D.	M. L. SOWERS, M.D.
CHARLES O. DAY, M.D.	F. B. SARGENT, M.D.
	H. C. WILLIS, M.D.

Superintendent of Nurses

MARY COONAHAN, R.N.

Chief Social Worker

JESSIE M. C. HUME, R.N.

Report of the Board of Managers

The Massachusetts Charitable Eye and Ear Infirmary is the second oldest hospital in New England. It was incorporated in 1827, and is one of the largest institutions in the world for the treatment of diseases of the eye and ear. Its staff is composed of prominent ophthalmic, aural, and laryngological surgeons and physicians, and at the present time the house staff includes surgeons from Toronto, Canada, to Portland, Oregon. The satisfactory completion of the term of service of fifteen months as a member of the eye house staff and twenty months as a member of the ear and throat house staff gives the graduating surgeon a standing in his profession which is recognized throughout the country.

During the year ending September 30, 1921, the institution has, we believe, functioned more efficiently than ever, and has performed a great public service in the treatment of diseases coming under its jurisdiction. The policy of the institution is to make a charge for board to those who are able to pay, but such patients as come properly recommended who are unable to contribute anything are admitted free. Medical and surgical treatment is free to all except patients in the private ward.

The number of patients admitted to the Infirmary during the year was 6,047. Of these, 1,408 were private patients. Of the 4,639 patients treated in the public wards, 689 were free, while the remainder paid either the full or some intermediate rate. This compares with a total last year of 5,856, of which 1,173 were private and 4,683 public, 663 of the latter being free and the remainder paying something for their board. In the public wards the total number of days board supplied was 46,422, of which 29,459 were free. This may be compared with the figures for the year 1920, in which the number of days board supplied in the public wards was 40,591, of which 20,920 were free. The number of new patients treated in the Out-Patient Department was 25,469, compared with 25,283 in 1920, while the total visits of old

REPORT OF THE BOARD OF MANAGERS

and new patients numbered 67,261 as compared with 69,115 last year.

There was a deficit of \$3,886.92 for the year ending September 30, 1921, which compares with a deficit of approximately \$4,000 for the year 1920, and the Managers feel that the results obtained under prevailing conditions reflect credit upon the Superintendent, Dr. Frederic A. Washburn, and upon the entire organization. This deficit is due primarily to the installation of a modern ice plant with cold storage boxes and the equipment of a new operating room at a total expenditure of approximately \$11,000, a large part of the cost of which was paid this year. Except for these permanent additions to the plant, the institution would have been operated during the past year at a cost of less than the receipts available for maintenance.

The financial results obtained in the operation of the Infirmary are more satisfactory in view of the fact that three years ago the annual contribution of \$45,000 given to the Infirmary by the State was discontinued. This amount represents about 17½% of the total operating expense for the past year. It is needless to say that these results have been obtained only by most rigid economy and the postponement of necessary improvements.

The private ward has now been in operation for five years, and, thanks to the loyal support of the members of the staff, has been a success from the beginning.

We desire to acknowledge with deep appreciation the contributions which have been made by friends of the institution, and to emphasize the physical needs mentioned by Dr. Washburn in his appended report, which are: first, an additional elevator, and second, a connecting building between the infirmary and the Out-Patient Building of the Massachusetts General Hospital. There are also other improvements which the Managers would be glad to make if funds were available, and in this connection we suggest that checks be made payable to the Massachusetts Charitable Eye and Ear Infirmary, and sent to 223 Charles Street, Boston.

The following comparison is of interest:

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

	1914	1921
Operating Expenses	\$133,197.21	\$256,202.47
Hospital Receipts	34,050.31	219,895.69
Receipts from Investments	28,378.60	27,283.00
Patients Admitted, not including Private Patients	3,630	4,639
Admitted Free	1,595	689
Paying Less than Full Rate	1,431	1,302
Out-Patient Visits	58,772	67,211
Out-Patient Admission Fee:		
Adults . . . . .	.10	.50
Children under sixteen years. . . . .	.10	.15
Cost per Patient per Week	13.72	32.15
Cost of Subsistence per Day per Patient . . . . .	.21½	.41

These figures indicate not only an increased cost of operation but also a more efficient handling of the situation from an operating standpoint. They also indicate a growing interest in the institution.

Our laboratory work has been successfully carried out by Dr. Frederick H. Verhoeff, pathologist, and attention is called to his appended report.

Under the guiding hand of Mr. William Dana Orcutt, the work that the Infirmary is doing and its needs have been presented by a campaign of publicity which has met with general approval, and we hope that as time passes a more complete understanding of what the institution is accomplishing will be in the minds of those who contribute to philanthropic works, and that this will be made manifest by increased contributions to the Massachusetts Charitable Eye and Ear Infirmary.

The Board of Managers desires to record their grateful appreciation of the devoted service rendered by the entire staff, and regrets the withdrawal of Dr. Harold M. Frost, who resigned as Assistant Superintendent to enter private practice.

JAMES DEAN, *Chairman*,
R. G. FESSENDEN,
JAMES C. HOWE,

Committee of the Board of Managers.

Report of the Treasurer

Year Ending September 30, 1921

INCOME

Income from Investments	\$27,283.00	
Income for Special Purposes, viz.:		
Brooks Fund, Social Service	250.00	
Sears Fund, Social Service	960.00	
Aural Surgeons' Fund	600.00	
Interest on balance	294.36	
R. B. Brigham Estate	1,000.00	
E. V. Ashton Estate	2,300.00	
Committee of the Permanent Charity Fund, Inc., General Purposes	3,000.00	
Committee of the Permanent Charity Fund, Inc., Social Service	1,625.00	
M. D. Flattery, Research Fund	250.00	
Donations	9,236.51	
Special Subscription	200.00	
Received by Superintendent per his report	219,895.69	
		<u>\$266,894.56</u>

DISBURSEMENTS

By the Treasurer, viz.:		
Insurance	\$1,769.68	
Auditors and Bookkeeping	375.00	
Accrued interest on investments	348.70	
Publicity Campaign	2,693.91	
Miscellaneous	257.79	
		<u>\$5,445.08</u>
By the Superintendent, per his report:		
General Expenses	\$245,192.54	
Social Service Work	10,512.84	
Instruments purchased from Aural Surgeons' Fund	497.09	
		<u>\$256,202.47</u>
Paid on account New Refrigerating Plant	7,573.89	
Paid on account New Wards	1,457.13	
		<u>\$270,678.57</u>
Balance of Income from Aural Surgeons' Fund carried to principal	\$102.91	
		<u>\$270,781.48</u>
Total Disbursements		<u>\$270,781.48</u>
Deficit		\$3,886.92

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

CAPITAL ACCOUNTS

RECEIPTS

Cash on hand October 1, 1920	\$11,003.21	
U. S. Certificates Paid	25,000.00	
Chas. F. Smith Legacy	8,663.00	
Geo. B. Upham Legacy	5,000.00	
Clara B. Kimball Legacy	1,000.00	
F. E. Weber Fund	75.00	
Balance of income from Aural Surgeons' Fund carried to principal	102.91	
Sale 246 American Tel. and Tel. Rights	126.94	
Sale of Securities, viz.:		
\$5,000.00 N. Y. City 4½% Bonds	4,537.50	
10,000.00 C., B. & Q. 4% Bonds	8,220.00	
11,000.00 American Tel. and Tel. 4% Bonds .	8,773.75	
46 Shares American Tel. and Tel.	4,853.00	
135 Shares Atchison, Topeka & Santa Fé Ry., preferred	10,626.88	
10,000.00 United Kingdom, Gt. Britain and Ireland 5½s	9,987.50	
		<hr/>
		\$97,969.69

Bought:

DISBURSEMENTS

30,000.00 U. S. Ctfs. of Indebtedness	\$30,000.00	
1,000.00 General Electric 6s	1,000.00	
5,000.00 American Agricultural Chemical 7½s	4,875.00	
10,000.00 New England Power 5s	8,550.00	
10,000.00 Mississippi River Power 5s	7,787.50	
10,000.00 General Electric 5s	8,673.75	
100 Shares U. S. Steel, Prf.	10,925.00	
Cash on hand October 1, 1921	22,271.52	
To take up Deficit	3,886.92	
		<hr/>
		\$97,969.69

RECEIPTS: SOCIAL SERVICE WORK

Income from Sears Fund	\$960.00	
Income from Brooks Fund	250.00	
Committee of the Permanent Charity Fund, Incorporated	1,625.00	
Contributions received by Superintendent . .	152.00	
Contributions received by Treasurer	3,928.00	
		<hr/>
		\$6,915.00

DISBURSEMENTS:

Salaries of Social Workers	\$9,072.98	
Salaries of Clerical Workers	684.00	
Stationery	110.48	
Postage, Telephone, Sundries	492.35	
Fares	153.03	
		<hr/>
		\$10,512.84

PATTERSON, TEELE & DENNIS,
Accountants and Auditors.

HENRY PARKMAN,
Treasurer.

Report of the Superintendent

TO THE BOARD OF MANAGERS:

Gentlemen: I have the honor to submit my report for the hospital year ending September 30, 1921. The hospital ward rates and the Out-Patient charges have remained as they were during the latter half of last year. Every effort is made to see that, while all who can pay do so, no real financial hardship is caused to any patient.

The following table shows the pay and free days for the last four years.

PATIENTS IN PUBLIC WARDS ONLY					
1918			1919		
Free		Full Rate	Free		Full Rate
30,388		12,020	21,649		15,723
	(42,408)			(37,372)	
1920			1921		
Free		Full Rate	Free		Full Rate
20,920		19,671	29,459		16,963
	(40,591)			(46,422)	

These figures are obtained by taking the amount of money received for board of patients in public wards and dividing that figure by the full rate of board prevalent at the time. This gives the number of days of paying patients reckoned as though they were paying full rates. By subtracting this figure from the total of patients' days we get the number of free days.

We have met two of the needs enumerated in the Superintendent's report of last year. An ice plant with cold boxes has been installed, a new operating room has been provided.

The chief physical needs remaining are:

1. An additional elevator.
2. A connecting building between the Infirmary and the Out-Patient Department building of the Massachusetts General Hospital.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

During the past year we have met and charged to our main-
tenance account the following unusual expenditures:

House Officers' Flat	\$550.00
X-Ray Quarters	400.00
Utility Room	450.00
Weatherstripping Private Ward	267.47
Fireproofing	230.00
Tennis Court	380.00
Refrigeration Plant	950.00
New Operating Room	200.00
Sewer, Nurses' Home	528.00
<hr/>	
Total	\$3,955.47

The house officers now have much improved living conditions. The X-Ray Department has been given room for needed expansion. The private ward has been provided with a recovery room. A utility room has been furnished for one of the public wards.

It is pleasant to record that we are thus beginning to do something to meet our many accumulated needs.

I record my regret at the loss of Dr. Harold M. Frost, who has resigned his position as Assistant Superintendent to enter private practice. Miss Sophia B. Eastman, R. N., has been appointed Assistant Superintendent.

Attention is invited to appended reports and tables of statistics.

Respectfully submitted,
FREDERIC A. WASHBURN,
Superintendent.

Report of the Work of the Gardner Building

During the past year 215 patients were treated in the Gardner Building. Of these, 28 were treated for gonorrheal ophthalmia neonatorum, and 35 for non-gonorrheal ophthalmia neonatorum. At the time of entrance the cornea was involved in 11 cases of gonorrheal ophthalmia neonatorum, 4 of these being clear on discharge. At the time of entrance the cornea was involved in 6 cases of non-gonorrheal ophthalmia neonatorum, 1 of these being clear on discharge. The cornea was not involved in any case of ophthalmia neonatorum after admission.

There were 6 patients treated for gonorrheal suppurative conjunctivitis, and 14 for non-gonorrheal suppurative conjunctivitis. At the time of entrance the cornea was involved in 3 cases of gonorrheal suppurative conjunctivitis, 1 of these being clear on discharge. At the time of entrance the cornea was involved in 6 cases of non-gonorrheal suppurative conjunctivitis, 1 of these being clear on discharge. The cornea was involved in 1 case of gonorrheal and 1 case of non-gonorrheal suppurative conjunctivitis after admission.

There were also 44 patients treated for trachoma.

There were 19 patients transferred to Gardner Building for erysipelas, measles, chickenpox, and other infectious diseases which manifested themselves in the general wards of the hospital.

Superintendent's Financial Statement

For October 1, 1920, to October 1, 1921

OPERATING EXPENSES		1921	1920	HOSPITAL RECEIPTS		1921	1920
SALARIES AND WAGES							
Officers and Clerks	\$11,774.70		\$9,908.38	Board of Ward Patients . .	\$46,513.69		\$41,939.04
Telephone Operators	2,814.01		2,388.32	Operating Room Fees . . .	4,298.50		1,330.00
Out-Patient Dept. Clerks . .	6,491.07		5,248.89	X-Rays	2,865.35		2,857.90
Social Service Department .	9,756.98		7,388.51	Wassermann Tests	179.00		94.00
Druggists	2,874.12		2,710.05	Optical	44,310.51		45,463.20
Opticians	4,519.92		4,024.12	War Tax on Glasses	1,260.11		1,126.53
Refractionists.	1,317.08		1,299.84	Apothecary.	14,032.87		13,666.76
Superintendent of Nurses				Admission Fees, Out-Patient			
and Assistants	2,900.00		2,930.00	Department	23,645.43		18,228.33
Head Nurses and Assistants	19,356.64		16,014.95	Throat Patients' Board, Op-			
Post Graduate Nurses . . .	172.00		390.05	erating Room	11,673.10		8,983.80
Pupil Nurses	835.39		887.43	Telephone, Interest, Stamps	676.00		475.24
Attendant Nurses	7,433.71		5,387.32	Grease, Bones, Boxes, Barrels			
Orderlies	7,466.12		6,051.47	and Junk	228.66		211.83
Ward Maids	3,198.84		2,781.53	Records and Certificates . .	442.75		393.70
X-Ray Department	1,514.48		1,536.60	Miscellaneous.	659.70		1,374.77
Pathological Laboratory . .	1,900.00		1,655.00	Board, Private Patients . . .	41,862.67		33,276.87
Store	330.00		320.00	Operating Room Fees, Private			
Housekeeping and Kitchen .	18,624.37		16,309.85	Patients	11,884.00		10,182.00
Laundry	7,045.75		5,396.85	X-Rays, Private Patients. . .	798.00		988.00
Maintenance, Property and				Wassermann Tests, Private			
Plant	9,231.87		7,957.43	Patients	33.00		51.50
				Miscellaneous, Private Patients	12.35		361.12
Special Nurses	\$119,553.09		\$100,586.59	Special Nurses, Ward Patients	\$205,375.69		\$181,004.59
	15,348.25		9,596.09	Special Nurses, Private Patients	1,337.50		749.50
					13,182.50		9,983.25
TOTAL	\$134,901.34		\$110,182.68	TOTAL	\$219,895.69		\$191,737.34

REPORT OF THE SUPERINTENDENT

OPERATING EXPENSES		1921	1920	SUMMARY FOR TWELVE MONTHS	
SUPPLIES					
General Administration . . .		\$5,894.87	\$5,635.44	Salaries and Wages	\$134,901.34
Apparatus and Instruments .		1,580.87	1,754.02	Supplies	121,301.13
Medical and Surgical . . .		14,146.03	11,446.91		
Wassermann Tests		176.00	119.00	Total Hospital Expenses . .	\$256,202.47
X-Rays		846.37	680.85	Total Hospital Receipts . .	219,895.69
Optical		14,744.40	14,869.05		
War Tax on Glasses		1,297.97	1,034.12	Excess of Expenses over Re-	
Housekeeping and Kitchen .		4,490.18	3,568.50	ceipts	\$36,306.78
Laundry		702.38	744.48		
Meat, Poultry, and Fish . .		13,363.11	15,145.54		\$40,509.35
Fruit and Vegetables . . .		2,834.82	4,508.62		
Bread and Flour		1,910.53	2,763.43		
Milk and Cream		10,625.87	11,975.03		
Groceries		8,135.27	10,313.00		
Butter and Eggs		6,342.19	7,625.41		
Gas		660.81	428.80		
Electric Lighting, Nurses'					
Home		591.67	585.10		
Heat, Light, and Power, Hos-					
pital Buildings		15,308.21	15,848.76		
Ice		3,024.30	2,464.10		
Fuel, Kitchen		7,015.84	865.14		
Fuel, Nurses' Home		1,926.34	1,791.41		
Water, Hospital Buildings .		1,223.64	1,262.40		
Water, Nurses' Home . . .		380.16	350.40		
Maintenance, Property and		7,781.12			
Plant		1,922.52	3,612.57		
Refunds		975.66	1,350.06		
Miscellaneous		1,297.97	1,321.87		
TOTAL		\$121,301.13	\$122,064.01		

Statistics

House Patients

Number of patients treated in ophthalmic wards	1,438
Number of patients treated in aural wards	3,201
Number of patients treated in private wards.	1,408
	<hr/>
	6,047
Average number of patients treated daily in the public wards .	127 +
Average number of patients treated daily in the private wards	25 +
Average number of days patients remained in the hospital . .	9 +
Number of days board furnished free	29,459
Number of days board paid at full rate in public wards	16,963
Number of days board paid in private ward.	9,358
	<hr/>
	55,780
Cost per patient public and private wards per week	\$32.15
Cost of subsistence per inmate per day . . . . .	.41 +
Number admitted free	689
Number admitted at less than \$10.50 per week	592
Number admitted at \$10.50 per week	651
Number admitted at \$15.00 per week	51
Number admitted at \$17.50 per week	8
Number admitted at \$21.00 per week	2,648

PRIVATE PATIENTS

Number admitted at \$28.00 per week	884
Number admitted at \$35.00 per week	8
Number admitted at \$49.00 per week	478
Number admitted at \$56.00 per week	10
Number admitted at \$63.00 per week	28
	<hr/>
	6,047

CONDITION OF PUBLIC WARD PATIENTS ON DISCHARGE

Relieved	4,352
Not relieved	70
Died	26
Otherwise discharged	63
Remaining in hospital September 30, 1921.	128
	<hr/>
	4,639

REPORT OF THE SUPERINTENDENT

Out-Patient Department

New patients treated:

Ophthalmic: Males	7,888	
Females	7,382	15,270
Aural: Males	5,703	
Females	4,496	10,199
Total		<hr/> 25,469

Old patients treated:

Ophthalmic	23,404	
Aural	18,388	41,792
Total visits in Out-Patient Department . . .		<hr/> 67,261

Report of Post-Graduate Training School for Nurses

In the absence of the Superintendent of Nurses, Miss Coonahan, it becomes my privilege to submit the report of the Training School for her.

The Post-Graduate Training School for Nurses has entered its twenty-eighth year and has graduated 598 students in all. From October 1, 1920, to September 30, 1921, fifty-five students entered the School, of whom fifty-three graduated and two failed to graduate. Eighty-two inquiries were received.

Affiliation with the Training School of the Bath General Hospital has been successfully concluded and has proved satisfactory. Affiliation with the Concord State Hospital, Concord, New Hampshire, is under consideration. One school already affiliated has increased the number of students from twelve to eighteen per year. Another school scheduled to send twelve students per year has sent but six.

The teaching has followed closely that of the previous year, and the usual number of subjects has been covered: Anatomy and Physiology of the Eye, Ear, Nose, and Throat; diseases of the Eye, Ear, Nose, and Throat; contagion pertaining to Ophthalmology and Otology, and Refraction. Practical instruction has been given by bedside and classroom demonstrations and personal oversight in the hospital wards.

The effect of war on the nursing work, as felt by this Training School, has been somewhat relieved but not wholly remedied. Relieved, because a larger number of nurses are desirous of fitting themselves for special work in various branches. Thus our own School has received more applicants.

Friends of the School will be glad to know that Miss Coonahan is having a much needed rest. She has spent the early spring and summer months in Pennsylvania, Porto Rico, Canada, and other places of interest, and will return early in the new year to resume her position.

POST-GRADUATE TRAINING SCHOOL REPORT

During the year the nurses have enjoyed the best of living conditions. Few have been ill and none seriously so. The Ladies' Visiting Committee and Trustees of the Hospital have been most kind in furnishing tickets to various entertainments and these have been thoroughly enjoyed by the nurses.

To all who have made the work of the Training School more efficient, hearty thanks are extended.

HARRIET L. HARRIS, R. N.

Acting Superintendent of Nurses.

Report of the Medical Social Service Department

October 1, 1920-1921

The work of the Department was handled by three full-time case workers, one ward worker, one half-time worker, one full-time medical-follow-up worker, one stenographer, and a chief worker, who, owing to pressure of work, was obliged to assist in the daily routine.

The department is run upon a strictly nonsectarian basis and in conjunction with all departments of the Infirmary. Its main functions are:

- First:* To follow up all cases referred from clinic or wards for the purpose of completing the medical treatment.
- Second:* To work in close coöperation with boards of health, public health agencies, etc., in an effort to minimize social diseases.
- Third:* To act as a means of interpretation between patient and physician, and in this way promote a better understanding of conditions, both medical and social.
- Fourth:* To arrange for readjustment and education of patients handicapped from eye or ear diseases.
- Fifth:* To maintain a high standard of educational work in the homes, along the lines of elementary hygiene and common standards of living.
- Sixth:* To work on the basis of prevention of blindness and deafness.

During the year 2,512 patients were known to the Department for various types of service, exclusive of the Medical-Follow-up work and of those reported to the Division of the Blind. Of this number, 349 were carried over from the previous year; 1,238 visits to homes were made, and 106 to agencies on behalf of the

REPORT OF MEDICAL SOCIAL SERVICE DEPARTMENT

patients. The close coöperation of the Boston Instructive District Nursing Association has continued, a fact which has greatly hastened the recovery of the patients.

The Department still works in close relationship with the Division of the Blind, a department of the State Board of Education, in order that the low-visioned or blind patients may get what is best along the line of education or work, in order that they may become at least partially if not wholly self-supporting. Three hundred and one patients belonging to this class were reported to the above-named organization.

The Medical-Follow-up worker personally steered to the Massachusetts General Hospital clinics those patients referred from the Eye Clinic who needed examination and treatment in a general hospital. Twelve hundred and one patients passed through her hands; 6,313 individuals were listed on the Follow-up, of which number 1,746 were carried over from the previous year; 674 were closed, 25 reopened and 71 referred for more intensive case work. Fourteen hundred and forty-eight postal cards were sent out and 106 home visits made.

General Work

The work of the General Department was carried by the Worker in Gardner Ward with the assistance of the half-time worker. This arrangement proved to be most unsatisfactory, as it was impossible to do really efficient work under this system.

As mentioned in last year's report, a half-time worker for Phlyctenular Keratitis was employed. This undoubtedly relieved the pressure somewhat, but the group being an ever-increasing one, it has become evident that a full-time worker is a necessity in order to prevent, if possible, the all too frequent recurrence of the disease. The problem of convalescent care for these children has been made easy for us through the coöperation of the different children's agencies of Boston and the outlying towns.

Interstitial Keratitis

The study of Interstitial Keratitis has been continued and some interesting data secured.

This work has been carried on jointly with the South Medical

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Department of the Massachusetts General Hospital and results have proven the value of this method, for not only has the patient's vision been restored beyond expectation, but where the hearing was also impaired it has been, if not wholly, then partly regained.

The period of treatment and supervision of each patient has averaged twelve months, but the end results have been very much worth while.

The individual members of the patients' family when get-at-able have had routine Wassermann tests, and, where necessary, put under treatment as a preventive measure.

Ophthalmia Neonatorum

During the year there was a perceptible falling off in the number of Ophthalmia Neonatorum cases. Fifty-three babies admitted to Gardner Ward suffering from Ophthalmia Neonatorum were referred for intensive case work, while eleven out-patients were given close medical supervision under direction. Of the total number, eleven were illegitimate.

On discharge, babies were referred back to the family physician, Board of Health, or the nearest baby welfare station for supervision of feeding and general condition.

Two babies admitted with damaged cornea were reported to the Division of the Blind.

Twenty-nine parents were examined and treated at the Massachusetts General Genito Urinary Clinic.

Ward Work

The work of the wards has been largely confined to preventive work among the children of Bradlee Ward.

Special home instructions to parents and convalescent care to many children have been given in the fight to prevent recurrences.

Aural Department

The work of the Aural Department naturally falls into two sections,—the General and Deaf Groups. These groups become either intensive or non-intensive cases.

One hundred and eighty-eight patients received the intensive type of care, while 142 were carried in conjunction with other social agencies.

REPORT OF MEDICAL SOCIAL SERVICE DEPARTMENT

The Public Health Nurses work in close coöperation with the General Group and render most valuable service.

On account of the shortage of funds, the additional Ear Worker so much needed during the past two years has not been employed, but it is hoped that in the near future a way may be found out of this difficulty, as the need is very great.

Deaf Group

As usual, the totally deaf children were referred automatically from the clinic.

We need more scientific classification in order to educate the deaf or hard-of-hearing child in the highest type of school for which he is best fitted.

It would seem that the most crying need of the deaf is a more practical vocational training, and in conjunction with it, a Placement Bureau, for it is of little use to educate a deaf child who, through lack of interest or understanding on the part of the general public, must remain idle for the remainder of his life.

Although results may at first be attained through private agency and influence, eventually the problem must become one for public backing, and lead directly to the organization of a Division of the Deaf, under the Department of Education, just as today there exists the Division of the Blind.

A course of ten lectures and demonstrations for Public Health Nurses was given at the Infirmary from December 7, 1920, to February 15, 1921, the average attendance at each lecture being 42, and it is hoped that an extension course may be given in 1921-1922.

Generous donations of books, magazines, toys, candy, and gifts for Christmas have been received from private individuals, clubs, factories, etc., and to the donors we make public acknowledgment.

Special acknowledgment is made of the coöperation of the Boston Wet Nurses Directory, which responded to the call for breastmilk on the occasions when mothers' milk could not be obtained otherwise, and when natural feeding was considered an absolute necessity for the babies of lowered vitality.

To the staff physicians, house officers, nurses, and clerks, and to all who aided the work of the Department, grateful thanks are tendered.

JESSIE M. C. HUME,
Chief Social Worker.

Report of the Pathological Laboratory

Among the cases of unusual interest in which microscopic examinations were made in the laboratory during the past year were: a case of albuminuric retinitis; one of leukemic retinitis; one of primary sarcoma of the cornea; one of retrobulbar abscess with anemic infarct of the optic nerve; and a case of coralliform cataract. The material from the latter case was sent here by Dr. Zentmayer, of Philadelphia. This case was of especial interest because it was the second case of the kind examined microscopically, the first case so examined having been reported from this laboratory in 1918. The microscopic findings were the same as in the first case, and thus confirmed the remarkable fact that the opacities in coralliform cataract consist of protein crystals.

The investigations relating to asteroid hyalitis and to primary intraneural tumors of the optic nerve have been completed and the results published.

Dr. R. C. Cheney has investigated the bacteria of corneal ulcers with special reference to determining the types of pneumococci concerned in *ulcus serpens*. An investigation of the effects upon the eye of lens matter set free by injury or operation is being conducted by the Pathologist and Dr. Lemoine. It has been found that certain individuals are highly sensitive to lens protein and that when their lenses are injured an inflammatory reaction is set up which may be so severe as to be mistaken for an infectious process. In this study, material collected here during the past twenty years, and supposed to be of little value, has been found of great service.

F. H. VERHOEFF,
Pathologist.

Report of the X-Ray Department

The following cases have been examined:

Positive	1,469
Negative	134
X-Ray treatments	121
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Total	1,724

A. S. MACMILLAN, M.D.,
Roentgenologist.

Scientific Papers Published by the Surgical Staff during the Year 1920-1921

"The Liver Tunnel and Cardio-Spasm." By Dr. Harris P. Mosher, M.D.
In press.

"Reestablishing Intra-Nasal Drainage of the Tear Sac." By Dr. Harris P. Mosher, M.D. *Laryngoscope*, July, 1921.

"A Study in Otosclerosis." By Dr. Harry P. Cahill, M.D. Transactions of the American Otological Society, 1921.

"Aspects of Social Service and Preventive Work in an Eye Hospital." By George S. Derby, M.D. New York State Medical Society, May, 1921.

"The Intraocular Foreign Body, a Surgical Ocular Emergency." By George S. Derby, M.D. *American Journal of Ophthalmology*, May, 1921.

"Sarcoma of the Cornea." By George S. Derby, M.D. Transactions of the American Ophthalmological Society, 1921.

"Accessory Sinus Blindness, Differential Diagnosis and Operative Technique." By Leon E. White, M.D. *The Laryngoscope*, August, 1921.

"Polypoid Degeneration of the Lining of the Antrum of Highmore." By Francis P. Emerson, M.D. *The Laryngoscope*, May, 1921.

"Microscopic Findings in a Case of Asteroid Hyalitis." By Frederick H. Verhoeff, M.D. *American Journal of Ophthalmology*, Vol. IV, p. 155, 1921.

"Foreign Proteids in the Treatment of Irido-cyclitis." By Frederick H. Verhoeff, M.D. *Archives of Ophthalmology*, Vol. L, p. 193, 1921.

"Primary Intraneural Tumors of the Optic Nerve." By Frederick H. Verhoeff, M.D. Transactions of Ophthalmic Section, American Medical Association, 1921.

"Glioma Retinæ Treated by X-Rays, with Apparent Destruction of the Tumor and Preservation of Normal Vision." By Frederick H. Verhoeff, M.D. *Archives of Ophthalmology*, Vol. I, p. 450, 1921.

Report of Ophthalmic Department

House Operations

CONJUNCTIVA		Injury	17
Conjunctival flap	23	Intraocular hemorrhage . .	1
Cutting of symblepharon . .	1	Iridocyclitis	2
Excision of tumor	5	Leucoma	1
Obliteration of bleb	1	Metastatic choroiditis . .	1
Rolling	1	Panophthalmitis	6
Suturing	4	Ruptured cornea	2
Transplantation of flap . . .	2	Ruptured globe	4
Transplantation of pterygium	8	Sympathetic ophthalmia .	1
Transplantation of symblepharon	1	Tumor	9
<hr/>		Ulcer of cornea	4
Total	46	Enucleation with implantation of glass ball	23
CORNEA		<hr/>	
Cauterization	32	Total	104
Curetment	4	EVISCKERATIONS	
Excision of apex of conical cornea	3	Evisceration, simple	5
Excision of section of cornea .	2	IRIS	
Infiltration of cornea with India ink	6	Elliot trephine	48
Neurotomy	2	Excision of growth	2
Paracentesis	28	Excision of prolapsed iris . .	14
Removal of dermoid cyst . .	2	Iridectomy:	
Removal of foreign body . .	6	for conical cornea	1
Saemisch	8	for glaucoma	61
Suturing	1	for iridocyclitis	3
<hr/>		for incarcerated iris	1
Total	94	for prolapsed iris	1
ENUCLEATIONS		for syphiloma of iris	1
Enucleations, simple, for		optical	21
Abscess of orbit	1	preliminary	14
Contracted orbit	1	Iridectomy with conjunctival flap	16
Cystoid cicatrix	1	Iridotaxis	4
Disorganized globe	11	Iridotomy	15
Endophthalmitis	1	Section of anterior synechia .	2
Following cataract extraction	2	<hr/>	
Foreign body in globe . . .	2	Total	204
Glaucoma	14		

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

LACRIMAL APPARATUS

Excision of lacrimal gland	2
Exploration of fistula	1
Extirpation of cyst	1
Extirpation of tear sac	25
Incision of abscess	6
Probing of lacrimal duct	1
Trichloracetic cauterization	6
Total	42

Incision of abscess of lid	8
Plastic	28
Plastic with skin graft	3
Ptosis:	
Hess's	10
Pagenstecher's Suture	1
Suturing	6
Tarsectomy	18
Tarsorrhaphy	1
Total	96

LENS

Cataract extraction:

Housain	11
in capsule	27
in capsule with iridectomy	29
in capsule with iridectomy and conjunctival flap and suture	35
linear	30
simple	7
unclassified	140
with iridectomy	125
with iridectomy and conjunctival flap	3
with iridectomy and conjunctival flap and suture	25
Discission	254
Extraction of lens for dislocation	2
Removal of capsule	4
Removal of foreign body	1
Total	693

MUSCLES

Advancement of:

external rectus	48
inferior rectus	1
internal rectus	18
superior rectus	1
Tenotomy of:	
external rectus	23
internal rectus	60
superior rectus	1
Total	152

ORBIT

Excision of tumor	4
Exenteration of orbit	1
Incision of abscess	1
Plastic	7
Plastic with skin graft	4
Removal of glass ball	1
Skin graft	2

Total 20

LIDS

Ectropion:

Snellen Suture	9
Zeigler	2

Entropion:

Gaillard-Arlt	3
Excision of canthoplasty	1
Excision of cyst	2
Excision of epithelioma	2
Excision of redundant tissue	2

SCLERA

Puncturing of sclera	11
Removal of foreign body	1
Sclerotomy	8
Suturing	2

Total 22

REPORT OF THE OPHTHALMIC DEPARTMENT

MISCELLANEOUS

Electrolysis for separation of retina	1	Removal of foreign body, globe	52
Excision of prolapsed vitreous	2	Removal of foreign body, vitreous	2
Removal of cyst of brow. . .	1	Section of vitreous	1
Removal of cyst inner canthus	1		<hr/>
Removal of foreign body, an- terior chamber	3	Total	63
		Total operations	1,541

Out-Patient Operations

Agnew's incision	2	Incision of tear sac	8
Bowman's operation	4	Incision of tumor of lid	3
Conjunctival flap	1	Incision of wen of lid	1
Curettage of chalcosis of lid	1	Obliteration of lacrimal sac	1
Curettage of growth of lid	1	Opening of canaliculus	1
Curettage of xanthoma	1	Probing of lacrimal sac	37
Ectropion		Removal of calcareous deposits	
Gaillard-Arlt	4	of conjunctiva	2
Snellen Suture	1	Removal of foreign body of	
Enucleation	4	conjunctiva	115
Evisceration	1	Removal of foreign body of cor-	
Excision of calcareous deposits		nea	1,534
of lid	1	Removal of foreign body of lid	117
Excision of growth of cornea	1	Removal of foreign body of	
Excision of mucous membrane	1	sclera	5
Excision of prolapsed iris	1	Removal of glass ball	1
Excision of varix of lid	1	Removal of granulation tissue	6
Incision of abscess of brow	5	Removal of milium	2
Incision of abscess of cheek	1	Removal of sebaceous cyst	7
Incision of abscess of lid	21	Removal of siderosis of cornea	1
Incision of bleb of conjunctiva	1	Removal of specimen for patho-	
Incision of boil of nose	1	logical examination	2
Incision of canaliculus	1	Removal of verruca	10
Incision of chalazion	303	Suturing of conjunctiva	1
Incision of cyst of conjunctiva	4	Suturing of lid	3
Incision of cyst of eyebrow	3	Tenotomy of external rectus	1
Incision of cyst of lid	8	Transplantation of pterygium	29
Incision of hordeolum	116	Transplantation of symblepharon	2
Incision of pimple of lid	1		
Incision of superficial infection		Total	2,380
of lid	1		

Report of Aural Department

House Operations

AURICLE

Aspiration of hematoma	3
Incision of abscess of auricle	2
Incision of postauricular lymph node	1
Plastic	1
Removal of cyst	2
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Total	9

MEATUS

Incision of furuncle of canal	13
Ossiculectomy	7
Plastic	3
Removal of exostosis of canal	1
Removal of foreign body	1
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Total	25

TYMPANUM

Incision of membrana tympani.	54
Removal of cholesteatoma	3
Removal of granulations	2
Removal of polypus	54
Removal of specimen for pathological examination	3
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Total	116

MASTOID REGION

Curettage of radical mastoid cavity	1
Decompression.	10
Exploration for tempero-sphenoidal abscess	1
Exploration of cerebellum	7
Exposure of cerebellar with exploratory punctures	1
Incision of abscess of jugular bulb	1
Incision of postaural abscess	31
Ligation of jugular	12
Opening of cerebellar abscess	2
Opening of subtemporal abscess	2
Opening of tempero-sphenoidal abscess	1

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Plastic for closure of postaural fistula	4
Radical mastoid	53
Radical mastoid with extradural abscess	1
Radical mastoid with primary skin graft	11
Removal of gauze from mastoid cavity	1
Removal of necrotic mastoid bone	1
Removal of tumor from mastoid cavity	1
Simple mastoid	305
Simple mastoid with Bezold's abscess	5
Simple mastoid with extradural abscess	1
Simple mastoid with ligation of jugular	1
Simple mastoid with perisinus abscess	2
Simple mastoid with postaural abscess	14
Simple secondary mastoid	36
Skin graft	14
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Total	519

NOSE, THROAT, AND PHARYNX

Breaking up of adhesions, nasopharynx	2
Bronchoscopy	2
Correction for external deformity of nose	15
Direct laryngoscopy	3
Esophagoscopy	4
Excision of ranula sac	1
Exenteration of ethmoids	56
Exploration of antrum	1
Incision of abscess of septum	1
Incision of peritonsillar abscess	12
Incision of retropharyngeal abscess	1
Intranasal dacryocystotomy	41
Intranasal frontal	11
Killian operation	19
Laryngectomy	1
Moore operation on maxillary antrum	3
Opening of sphenoid	7
Passing of esophageal bougie	8
Plastic for external deformity of nose	3
Puncturing and irrigating of antrum	46
Radical antrum	72
Removal of adenocystoma of antrum	1
Removal of adenoids	157
Removal of foreign body from esophagus	2
Removal of growth of nose	2
Removal of papilloma of larynx	1

REPORT OF THE AURAL DEPARTMENT

Removal of polypus of nose	15
Removal of tonsils	137
Removal of tonsils and adenoids	2,542
Removal of tumor of larynx	4
Resetting of nose.	3
Submucous resection of septum	399
Suturing of faucial pillars following tonsillectomy	1
Tracheotomy	8
Turbinectomy	34
Turbinotomy	22
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Total	3,637

MISCELLANEOUS

Anastomosis, facial and hypoglossal nerves	1
Blood transfusion for hemorrhage and post-operative shock	1
Excision of tumor of jaw	1
Excision of tumor of nasopharynx	1
Extraction of teeth	16
Exploration for deep cervical abscess	1
Incision and drainage for osteomyelitis, temporal bone	3
Incision and drainage for sepsis of ankle	1
Incision of abscess, intratemporal region	1
Incision and drainage of abscess of neck.	1
Incision of abscess of buttock	1
Incision of abscess of cheek	4
Incision of abscess of neck.	11
Incision of abscess of parotid gland	1
Incision of abscess of wrist	1
Incision of lacrimal abscess	2
Incision of maxillary abscess	1
Incision of submental abscess	1
Injection of salvarsan	21
Plastic of lip	1
Plastic of scalp	1
Removal of foreign body, lung	1
Removal of Gasserian ganglion	1
Removal of specimen of neck	1
Ventricular puncture	3
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Total	78

Total operations	4,384
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Out-Patient Operations

Aspiration of blood blister . .	1	Incision of pustule of concha .	1
Aspiration of hematoma of ear	4	Incision of wen	3
Aspiration of hematoma of septum	4	Opening of antrum	69
Breaking up of nasal pharyngeal		Paracentesis of membrana tym-	
synechia	1	pani	2,006
Cauterization of nose	1	Removal and cauterization of	
Curettage of lobe of ear . .	1	papilloma of ear	1
Excision of cyst of auricle . .	4	Removal of foreign body from	
Excision of cyst of canal wall .	1	ear	34
Incision of abscess of auricle .	4	Removal of foreign body from	
Incision of abscess of canal . .	329	tonsil	3
Incision of abscess of septum	2	Removal of granuloma from ear	1
Incision of bleb of canal . . .	1	Removal of polypi from ear .	6
Incision of carbuncle of nose .	1	Removal of polypi from nose .	34
Incision of cervical gland . .	1	Removal of specimen for patho-	
Incision of furuncle of auricle .	1	logical examination	1
Incision of furuncle of nose .	1	Resetting of nose	1
Incision of furuncle, postaural		Submucous resection of septum	101
region	1	Turbinectomy	1
Incision of mucocele	1	Turbinotomy	14
Incision of peritonsillar abscess	8		
Incision of postaural wound .	1		
		Total	2,644

Table of Diseases

Compiled from Records

	HOUSE	OUT- PATIENT
SECTION I		
Specific Infectious Diseases	258	426
SECTION II		
Diseases Due to Animal Parasites	3	12
SECTION III		
Diseases of Metabolism	12	5
SECTION IV		
Diseases Peculiar to Infancy	118	104
SECTION V		
Diseases Due to Physical Agents	5	5
SECTION VI		
Poisonings. Intoxications	1	2
SECTION VII		
Tumors, Benign and Malignant	184	1,024
SECTION VIII		
Congenital Malformations	21	25
SECTION IX		
General Injuries and Diseases of Skin and Subcutaneous Tissue	18	36
SECTION X		
Special Skin Diseases	6	414
SECTION XI		
Diseases of the Circulatory System	10	90
SECTION XII		
Diseases of the Lymphatic System	25	120
SECTION XIII		
Diseases of the Blood	1	3
SECTION XIV		
Diseases of the Ductless Glands	1	17
SECTION XV		
Diseases of the Nervous System	66	363

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

	HOUSE	OUT- PATIENT
SECTION XVI		
Diseases of the Bones, Joints, Muscles, Tendons, and Fascia	13	41
SECTION XVII		
Diseases and Injuries of the Eye and Ear:		
Diseases of the Eye	2,247	28,261
A. General	207	15,725
B. Lids	67	1,686
C. Lacrimal apparatus	88	529
D. Conjunctiva	70	3,326
E. Cornea	377	3,315
F. Anterior chamber	8	42
G. Sclera	8	110
H. Lens	925	988
J. Uveal tract	11	55
1. Iris	82	377
2. Ciliary	14	19
3. Choroid	13	169
K. Retina	25	180
L. Vitreous	25	264
M. Optic Nerve	24	185
N. Eyeball	161	262
O. Orbit	8	14
P. Disturbances of Motion	134	1,015
Diseases of the Ear	918	13,445
Q. General		51
R. Auricle	19	26
S. External Auditory Canal	53	6,035
T. Eustachian Tube		2
V. Middle Ear and Mastoid	832	7,310
W. Internal Ear	14	21
SECTION XVIII		
Diseases of the Nose and Accessory Sinuses	883	1,573
SECTION XIX		
Diseases of the Mouth, Lips, Cheeks, Pharynx, Tonsils, and Palate	2,790	3,558
SECTION XX		
Diseases of the Jaw, Teeth, and Gums	13	170
SECTION XXI		
Diseases of the Tongue		1
SECTION XXII		
Diseases of the Esophagus	7	4
SECTION XXIV		
Diseases of the Intestines	1	

TABLE OF DISEASES

	HOUSE	OUT- PATIENT
SECTION XXV		
Diseases of the Liver and Gall Ducts	1	2
SECTION XXIX		
Diseases of the Larynx	6	32
SECTION XXX		
Diseases of the Trachea and Bronchi	3	11
SECTION XXXI		
Diseases of the Lungs	2	1
SECTION XXXII		
Diseases of the Pleura and Mediastinum	1	
SECTION XXXIII		
Diseases of the Kidney and Ureter	11	3
SECTION XXXVIII		
Puerperal State	1	1
SECTION XLI		
Ill-Defined or Unclassified Diseases	83	808
Totals	7,709	50,557

Donations

F. M. Adams	\$5.00
Norman D. Adams	10.00
Mrs. Samuel G. Adams	10.00
Mrs. Ella R. Alcaide	15.00
E. B. Alford	50.00
Dr. and Mrs. Freeman Allen	5.00
William Amory	50.00
James H. Anderson	100.00
Anonymous . . . . .	.50
Anonymous	13.00
Anonymous . . . . .	.50
Anonymous . . . . .	.50
Maud E. Appleton	100.00
Samuel Appleton	100.00
Mrs. Edmund R. Arnold	5.00
Mrs. William Avery	10.00
Albert Babcock	5.00
Ellen S. Bacon	10.00
Louis Baer	10.00
L. D. Baker	4.00
Mrs. C. H. Baldwin	5.00
Anonymous	100.00
Edmund D. Barbour	10.00
Mrs. Axel Benson	1.00
Mary C. Bigelow	25.00
Nathan D. Bill	10.00
Mrs. H. W. Blanchard	5.00
Ida C. Blanchard	5.00
Mrs. William D. Boardman	10.00
Henry H. Bond	10.00
Mrs. Herbert L. Bowden	20.00
Charles P. Bowditch	25.00
Mrs. William H. Bowker	5.00
Mrs. F. B. Boyce	10.00
E. H. Bradford	10.00
Arthur T. Bradlee	25.00
Edward M. Brewer	25.00
Hannah D. Brown	5.00
Mary H. Buckingham	5.00
Herbert E. Buffum	5.00
Edward K. Butler	10.00
Mrs. W. A. Burnham	3.00
Mr. and Mrs. Allston Burr	10.00
Mrs. Charles C. Burr	20.00
Dr. Charles A. Byrnes	5.00
Dr. Harry F. Byrnes	5.00
Mrs. Annie E. Caldwell	3.00

Amount carried forward,

\$875.50

DONATIONS

	<i>Amount brought forward,</i>	\$875.50
Mrs. Arthur T. Cabot	\$100.00	
Arthur A. Carey	9.00	
Helen B. Carter	25.00	
James R. Carter	25.00	
Mrs. James R. Carter	10.00	
Mrs. J. W. Carter	10.00	
Mr. and Mrs. Richard B. Carter	10.00	
Dr. Fenner A. Chace	5.00	
Mrs. C. P. Chamberlain	5.00	
John G. Chandler	20.00	
Elizabeth M. Chase	10.00	
Mrs. Theodore Chase	25.00	
William C. Chick	25.00	
Edna G. Church	25.00	
Dr. E. J. Clark	5.00	
Mrs. Frederic S. Clark	5.00	
Elizabeth P. Cleaveland	5.00	
Julia L. Coburn	30.00	
Dr. William J. Collins	1.00	
James D. Colt	25.00	
Mrs. C. A. Cummings	10.00	
Ellen S. Curtis	10.00	
Mrs. G. S. Curtis	100.00	
John S. Curtis	20.00	
Miss M. G. Curtis	5.00	
Mrs. Richard C. Curtis	150.00	
Hayward W. Cushing	25.00	
Sarah P. Cushing	10.00	
Mrs. Eben Dale	10.00	
Mrs. Lydia J. Dale	10.00	
Bernard J. Daly	5.00	
E. A. Daniels	2.00	
Harold S. Davis	10.00	
Mrs. Joseph E. Davis	10.00	
James Dean	171.87	
John H. Densmore	10.00	
Mr. and Mrs. B. V. Degen	2.00	
Frederick Dodge	25.00	
Mary W. Dodge	1.00	
Mrs. Gordon Donald	10.00	
Chester Downing	3.00	
Charles F. Dowse	20.00	
Eben S. Draper	25.00	
Sydney Dreyfus	10.00	
Mary F. Drown	5.00	
John Dunton . . . . .	.50	
Mrs. D. Brewer Eddy	10.00	
Charles W. Eliot	10.00	
O. T. Ellis	10.00	
Josephine D. S. Emerson	10.00	
Dwight W. Ensign	5.00	
Mrs. Henry H. Fay	25.00	
Mary Fay	5.00	
	<hr/>	
	<i>Amount carried forward,</i>	\$1,985.87

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

	<i>Amount brought forward,</i>	\$1,985.87
W. Rodman Fay	\$25.00	
Waldo B. Fay	5.00	
Edward W. Fenno	10.00	
Russell G. Fessenden	100.00	
S. H. Fessenden	50.00	
Ernst Flentje	15.00	
Edward B. Field	15.00	
Ellen Forbes	10.00	
J. M. Forbes	20.00	
Mrs. Waldo E. Forbes	25.00	
Dr. Charles C. Foster	50.00	
Mrs. Reginald Foster	50.00	
A Friend	150.00	
Eugenia Frothingham	5.00	
Mrs. George P. Gardner	100.00	
A. R. Gransten	10.00	
Harriet Gray	100.00	
Mrs. John C. Gray	10.00	
Morris Gray	10.00	
Mrs. E. F. Greene	5.00	
Henry D. Greenough	10.00	
Edward W. Grew	15.00	
Edwin A. Grozier	100.00	
Mrs. C. H. Gibson	10.00	
Vaughan Harmon	10.00	
Harriet J. Haskell	5.00	
Margaret Haskell	15.00	
Mary E. Haven	20.00	
Stanley W. Heath	3.00	
Albert S. Heywood	50.00	
Dr. John J. Hickey	5.00	
E. A. Hills	50.00	
Mrs. T. V. Hill	25.00	
T. C. Hollander	25.00	
Mrs. John Homans	10.00	
Henry C. Hopewell	5.00	
Emma A. Hopkins	5.00	
Henry Hornblower	100.00	
Cornelia Horsford	10.00	
F. L. Howes	25.00	
Elizabeth K. Howland	20.00	
Henry S. Hunnewell	100.00	
Harriet Buell Hudson	2.00	
James M. Hunnewell	50.00	
Fannie E. Hurlburt	5.00	
Mrs. C. F. Hutchins	5.00	
Miss Gladys Ireland	5.00	
Mrs. C. C. Jackson	10.00	
Arthur H. James	25.00	
Arthur S. Johnson	20.00	
Edward C. Johnson	15.00	
Amelia A. Jones	25.00	
H. J. Keaney	10.00	
	<i>Amount carried forward,</i>	\$3,540.87

DONATIONS

	<i>Amount brought forward,</i>	\$3,540.87
Mrs. Frances T. Keating	\$5.00	
William B. Kehew	10.00	
Stillman F. Kelly	25.00	
F. L. Kennedy	10.00	
Charles H. Kidder	25.00	
Rev. and Mrs. T. R. Kimball	50.00	
Grace W. King	10.00	
John Lawrence	250.00	
Walter C. Lewis	10.00	
George D. Leavitt	10.00	
J. R. Leeson	10.00	
Mrs. Louis Levisseur	10.00	
Mrs. E. M. Levy	5.00	
H. S. N. Lewis	10.00	
M. Elizabeth Lombard	20.00	
Alice M. Longfellow	10.00	
Mr. and Mrs. William C. Loring	1,000.00	
Thacher Loring	20.00	
Dr. O. H. Lothrop	100.00	
Mrs. C. T. Lovering	10.00	
Ella F. Luther	5.00	
George S. Lyman	10.00	
Theodore Lyman	50.00	
Charles R. Lynde	10.00	
"L. R. L."	10.00	
Mrs. Helen W. McElwain	25.00	
W. W. McGrath	1.00	
Leslie McGregor	25.00	
Mrs. W. L. McKee	5.00	
Frank B. McQuesten	25.00	
Rev. T. J. Mahony	10.00	
Mrs. Henry S. Mann	10.00	
Ellen F. Mason	50.00	
Ada Wing Mead	5.00	
Mrs. Daniel Merriman	20.00	
"A Mite"	1.00	
Mrs. William J. Mixter	10.00	
Mrs. John F. Moors	25.00	
Harriet S. Morgan	5.00	
Mrs. John H. Morison	5.00	
Mrs. Frank Morrison	25.00	
Mrs. Thomas Motley	10.00	
Franklin Nourse	25.00	
Nellie M. Nash	10.00	
Mrs. Thomas O'Neil	5.00	
F. S. Osgood	5.00	
Dr. C. G. Page	3.00	
James P. Parker	20.00	
Mrs. Henry Parkman	10.00	
Lucy Parsons	5.00	
Harriet H. Paul	10.00	
C. C. Payson	10.00	
Gertrude W. Peabody	20.00	
	<i>Amount carried forward,</i>	\$5,605.87

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

<i>Amount brought forward,</i>		\$5,605.87
Mrs. George H. Pendergast	\$10.00	
D. L. Pickman, Jr.	25.00	
Alice L. Porter	5.00	
Melville Prentiss	5.00	
Mary Prescott	15.00	
Helen M. Ranney	20.00	
A. C. Ratchesky, Charity Foundation	150.00	
William H. Reed	100.00	
Philip M. Reynolds	25.00	
Mrs. Emma L. Rice	25.00	
Amelia Richards	5.00	
N. M. Richards	10.00	
J. B. Richmond	25.00	
Mrs. F. E. Roper	25.00	
Helen Rosenbush	50.00	
Mrs. W. O. Ross	10.00	
Mrs. Robert Shaw Russell	600.00	
Paul J. Sachs	10.00	
Mrs. P. L. Saltonstall	5.00	
Mrs. R. M. Saltonstall	25.00	
Sabin P. Sanger	10.00	
Caroline A. Saunders	5.00	
Henry F. Sears	50.00	
Herbert M. Sears	200.00	
Richard D. Sears	100.00	
Mrs. Roland Seegar	20.00	
Mrs. G. S. Selfridge	5.00	
Henry S. Shaw	25.00	
Emily B. Shepard	10.00	
Mrs. S. Shapiro	5.00	
Katherine E. Silsbee	100.00	
C. R. Simpkins	25.00	
Mrs. William Sims	5.00	
R. Mayo Smith	5.00	
Herbert W. Smythe	5.00	
H. Weir Smyth	5.00	
Emily L. Sohier	5.00	
Mary D. Sohier	5.00	
Mary E. Soule	10.00	
W. Stanley	5.00	
William S. B. Stevens	2.00	
Mrs. R. H. Stevenson	10.00	
Mr. and Mrs. R. H. Stevenson, Jr.	250.00	
Col. Cecil Stewart	5.00	
Mrs. M. B. Stone	10.00	
Miss M. P. Stone	15.00	
Mrs. E. C. Storrow	25.00	
H. O. Storrow	10.00	
Solomon P. Stratton	20.00	
Robert S. Sturgis	50.00	
Mrs. Francis H. Swift	5.00	
Edmund O. Sylvester	10.00	
Caroline H. Taintor	10.00	
<i>Amount carried forward,</i>		\$7,772.87

DONATIONS

	<i>Amount brought forward,</i>	\$7,772.87
Mary A. Tappan	\$20.00	
Charles H. Taylor, Jr.	75.00	
Ward Thorom . . . . .	.50	
Charlotte H. Tiffany	100.00	
Mrs. E. A. Tiffany	35.00	
Walter F. Tilton	5.00	
H. G. Townsend	5.00	
Charles H. Traiser	45.00	
S. Chase Tucker	5.00	
Mrs. Bayard Tuckerman, Jr.	25.00	
Mrs. C. S. Tuckerman	10.00	
Bertha H. Vaughan	10.00	
Ethel Vaughan	13.00	
W. W. Vaughan	10.00	
Mrs. H. F. Vickery	5.00	
H. O. Von Schuckmann	5.00	
Charles P. Ware	5.00	
Mrs. Bayard Warren	100.00	
Samuel T. Warren	15.00	
Dr. Frederic A. Washburn	70.00	
Frank S. Waterman	5.00	
W. F. Watters	50.00	
F. G. Webster	200.00	
W. B. P. Weeks	10.00	
Mrs. A. C. Wellington	3.00	
Edward A. Whitman	15.00	
Mrs. William Whitman	50.00	
Frank Whitney	10.00	
H. A. Wilder	5.00	
Mrs. Arthur Williams	2.00	
E. Francis Williams	50.00	
E. Frances Williams	100.00	
Mrs. Ella E. Williams	5.00	
Mrs. J. Williams	10.00	
A. H. Wilson	10.00	
Mrs. Thomas L. Winthrop	10.00	
Alice W. Woodbury	1.00	
Elizabeth C. Woodford	10.00	
Mary Woodman	25.00	
H. D. Woods	100.00	
Mrs. B. L. Young	10.00	
Helen D. Youngman	20.00	
	<hr/>	\$9,032.37

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Christmas Donations

Anonymous	\$6.81	
Anonymous	3.00	
Mr. Otis E. Burt	3.00	
Mrs. C. A. Davenport	1.00	
A Friend	5.86	
J. K. Jensen	2.00	
Mr. Alex Komitsky	5.00	
Board of Managers	102.72	
Mr. George Marden	5.00	
Dr. H. C. Mohr	2.00	
Mr. and Mrs. George Moroney	5.00	
Theresa L. Mossey	1.00	
Mrs. Robert Shaw Russell	25.00	
From Staff	16.75	
Mr. Antonia Tomasello	10.00	
Dr. David Wishart	10.00	
		<hr/>
		\$204.14

Artificial Eyes: Mrs. J. R. Elliot.

Books and Magazines: Charles Wood Bond, Miss Miriam Farshum, Dr. Oliver A. Lothrop, Mr. W. L. Sperry, Mrs. Mary Hull, Mr. Samuel Hammond, Mrs. H. H. Richardson, Mrs. F. W. Fosdick, Mrs. F. F. Gray, Mr. E. M. Dunbar, Mr. Charles Brush, Reverend Simpson, Dr. and Mrs. Mosher, Miss Lucia Jackman, Anonymous, Miss Teresa Merriam, Mrs. Arnold Scott, Bliss Congdon, Dr. G. W. Mills, Mrs. F. R. Bangs, Anna Samson, Mrs. D. B. Fay, Edgar Gallaway, Miss Anna Thomas, Houghton & Dutton Donation Department, Junior Red Cross, Miss Mary Hull, Mrs. C. C. Wylie.

Candy, Cake, and Fruit: Boston Confectionery Co., Mrs. Curtis, Mrs. Richard Curtis, Miss W. S. Forbes, Dr. and Mrs. Mosher, Women's Guild of Central Church, William Perley Garrish, Squirrel Candy Co., Candyland Confectionery Co., Mr. Arthur Smith, Manhattan Market, Briggs Confectionery Co., Apollo Confectionery Co., Page & Shaw, Russell Chocolate Factory, Bell Chocolate Factory, Mrs. George H. Jackson.

Christmas Greens: Mrs. Frank Monks, Miss Woodworth.

Christmas Ornaments: Miss Teresa Merriam.

Clothing: Dr. Ralph Hatch, Miss Sara Nicholson, Mrs. J. K. Jensen, Mrs. G. F. Harding.

Entertainment: Miss Teresa Merriam, Mr. H. Bradlee Fenno, Mrs. Richard C. Curtis.

Emergency Fund Social Service: Miss Teresa Merriam.

DONATIONS

Flowers: Don C. Tiffany, Paul C. Tiffany, Mrs. William Tucker, Mrs. Harold Peabody, Robbins Brothers, The Florist Association of Boston, Mrs. A. W. Crowell, Mrs. Mary Stuart Moore, Mr. Albert C. Burrage, Mrs. Lulu G. Adams, Rev. John McMahon, Frances Willard Settlement, Mrs. John Harwood.

Games: Mr. John Lawrence, Mrs. C. E. Ordway, Mrs. Homer Lockwood, Mrs. Reginald Foster, The Oxford Print.

Glasses: Mr. Morris Gray, Miss M. C. Amory, Mrs. Morris Grey, Miss Mary Willard, Mrs. F. S. Parker, Mrs. M. S. Amory, Mrs. George Davis.

Ice Cream: Mr. and Mrs. A. E. Higgins.

Lobsters: Zenas A. Howes.

Music: Mr. Iver Olsen.

Note Paper: Boston Book Bindery.

Surgical Dressings: American Red Cross, Mrs. M. L. Gardner.

Toys: Mr. Joseph Winslow, Mrs. Mary Hull, Mrs. C. W. Moses, Rev. C. T. Billings, Mrs. Barthold Schlesinger, Anonymous, Mrs. B. T. Stephenson, Prescott Ketull, Anonymous, H. C. Swain, Miss M. Ellis, Mrs. W. B. Smith, Mrs. G. G. Whitney, Mrs. Walter Woodman, Mrs. R. E. Apthorp, Miss Bessie Paine, Blanche Howard, Mrs. C. S. Clapp, Mrs. P. Bigelow, Jr., Mrs. J. F. Davenport, Mrs. Walter Tufts, Mrs. Freeman Allen, Mrs. E. C. Hammond, Mrs. Fred Miller, Miss K. Ellis, Mrs. Harold Peabody, Miss Elizabeth Porter, Rev. T. P. Bentley, Miss Florence Smith, Mrs. E. L. Mark, Mrs. George M. Jackson, Moxie Company, Intercollegiate Community Service, Mrs. F. W. Fosdick, Mrs. Edith Bolster, Dennison Mfg. Co., Mrs. E. E. Wright, Rebecca Dennison, Miss Mary Hull, Mrs. Samuel Hammond, Mrs. McAfee, Mrs. C. C. Wylie, Mrs. T. P. Curtis.

Miscellaneous for Christmas: Mrs. Preston, S. S. Pierce Co., H. F. Fitzpatrick, Anonymous, The Cam Tobacco Co., Mrs. Adolph Mix, Mrs. Miller.

Form of a Bequest to the Infirmary

*I give and bequeath to the Massachusetts
Charitable Eye and Ear Infirmary of Boston,
the sum of dollars, to be applied to
the uses of said Infirmary.*

Ninety-seventh Annual Report
of the
**Massachusetts Charitable
Eye and Ear Infirmary**

Incorporated in 1827

For the Year
1922

THE MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

243 Charles Street, Corner Fruit Street, Boston, Mass.

OUT-PATIENT DEPARTMENT

The Out-Patient Department is open daily, excepting Sundays and legal holidays, from 8.30 to 10.30 A.M., for examination and treatment of all poor persons afflicted with disease of the eye or ear. Persons needing treatment in the hospital wards will be advised accordingly. Medicines and glasses are furnished at the Infirmary, but neither prescription nor advice will be sent by mail, express, or messenger.

Admission fee: Adults, fifty cents; children under sixteen years of age, fifteen cents.

HOSPITAL

Persons recommended for admission to the hospital wards should apply at the Director's Office before 1 P.M., *on week days only, excepting legal holidays.*

Accident and emergency cases admitted at any time.

All communications about the Infirmary or any inmate must be addressed to the Director, and should contain the full name of the patient as well as the name and address of the writer.

Persons admitted to the wards as in-patients will be charged for board at the rate of twenty-one dollars per week, payable in advance, unless some special arrangement is made by the Director. No reduction in rate of board made to those residing outside the Commonwealth of Massachusetts.

Visitors will be admitted to see patients from 1 to 2 o'clock in the afternoon, and but one visitor a day is allowed to each patient over seven years of age. Children under seven years of age may be visited on Sundays and legal holidays from 1 to 2 P.M., when two visitors are permitted. Visitors may be excluded at any time.

On Sundays and holidays two visitors are allowed each patient.

The Infirmary reserves the right to investigate every case.



Suffolk Eng. Co Boston

MAIN BUILDING, MARCH, 1899

Ninety-seventh Annual Report
of the
Massachusetts Charitable
Eye and Ear Infirmary

For the Year
1922

BOSTON
GRIFFITH-STILLINGS PRESS
1923

Officers, 1923

Board of Managers, 1922-1923

1887	GEORGE P. GARDNER, 40 State Street
1893	HENRY PARKMAN, 36 Temple Place
1896	WILLIAM D. SOHIER, ¹ Room 17, 53 State Street
1903	WILLIAM C. ENDICOTT, 71 Ames Building
1903	RUSSELL G. FESSENDEN, 50 State Street
1905	HERBERT M. SEARS, 53 State Street
1907	CHARLES P. CURTIS, 71 Ames Building
1907	ROBERT H. STEVENSON, Jr., 118 Marlborough Street
1907	JOHN LAWRENCE, ¹ 10 State Street
1914	JAMES DEAN, 19 Congress Street
1914	JAMES C. HOWE, 17 Court Street
1918	EDWARD H. BRADFORD, M.D., 220 Beacon Street
1922	ALBERT L. SCOTT, Lockwood, Greene & Co., Inc., 24 Federal Street
1922	T. JEFFERSON COOLIDGE, 184 Beacon Street

President

EDWARD H. BRADFORD, M. D.

Secretary

JAMES C. HOWE, 17 Court Street, Boston

Treasurer

HENRY PARKMAN, 36 Temple Place, Boston

Executive Committee

GEORGE P. GARDNER

HERBERT M. SEARS

JOHN LAWRENCE

Finance Committee

RUSSELL G. FESSENDEN

JAMES DEAN

JAMES C. HOWE

¹Appointed by the Commonwealth.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Visiting Committee

January	MR. FESSENDEN	July	MR. PARKMAN
	MR. SEARS		MR. STEVENSON
February	MR. SEARS	August	MR. STEVENSON
	DR. BRADFORD		MR. COOLIDGE
March	DR. BRADFORD	September . .	MR. COOLIDGE
	MR. SCOTT		MR. CURTIS
April	MR. SCOTT	October . . .	MR. CURTIS
	MR. HOWE		MR. ENDICOTT
May	MR. HOWE	November . .	MR. ENDICOTT
	MR. DEAN		MR. GARDNER
June	MR. DEAN	December . .	MR. GARDNER
	MR. PARKMAN		MR. FESSENDEN

Ladies' Visiting Committee

MRS. RICHARD C. CURTIS, *Chairman*

MISS HARRIET H. BRAYTON	MRS. BARTLETT HARWOOD
MISS ELLEN CURTIS	MISS MILDRED KENNEDY
MRS. LOUIS CURTIS, JR.	MISS HELEN MACLEOD
MRS. THOMAS P. CURTIS	MISS TERESA L. MERRIAM
MRS. SAMUEL ELIOT	MRS. THOMAS R. MORSE
MRS. WILLIAM ENDICOTT	MRS. JAMES F. NORRIS
MRS. J. F. FAY	MRS. HAROLD PEABODY
MRS. WILLIAM S. FORBES	MRS. A. N. RANTOUL
MRS. REGINALD FOSTER	MRS. R. STEINART
MRS. R. CUSHING HAMLIN	MISS CLARA B. WINTHROP

Executive Officers

Director

FREDERIC A. WASHBURN, M.D.

Assistant to the Director

SOPHIA B. EASTMAN, R.N.

Surgical Board

Consulting Ophthalmic Surgeons

HENRY W. BRADFORD, M.D.	EDWIN E. JACK, M.D.
H. BECKLES CHANDLER, M.D.	FREDERICK E. CHENEY, M.D.
MYLES STANDISH, M.D.	HENRY H. HASKELL, M.D.

OFFICERS, 1923

Consulting Aural Surgeons

EDWARD M. PLUMMER, M.D.

FREDERICK L. JACK, M.D.

Ophthalmic Chiefs of Service

ALEXANDER QUACKENBOSS, M.D.

FRED M. SPALDING, M.D.

Aural Chiefs of Service

EUGENE A. CROCKETT, M.D.

PHILIP HAMMOND, M.D.

Laryngological Chief of Service

HARRIS P. MOSHER, M.D.

Ophthalmic Surgeons

FREDERICK H. VERHOEFF, M.D.

WALTER B. LANCASTER, M.D.

PETER H. THOMPSON, M.D.

GEORGE H. RYDER, M.D.

GEORGE S. DERBY, M.D.

SAMUEL J. McDONALD, M.D.

Aural Surgeons

D. HAROLD WALKER, M.D.

WILLIAM F. KNOWLES, M.D.

HARRIS P. MOSHER, M.D.

FRANCIS P. EMERSON, M.D.

Laryngologists

D. CROSBY GREENE, JR., M.D.

HARRY A. BARNES, M.D.

Assistant Ophthalmic Surgeons

W. HOLBROOK LOWELL, M.D.

HUGO B. C. RIEMER, M.D.

EDWARD K. ELLIS, M.D.

CLARENCE F. WORTHEN, M.D.

WILLIAM N. SOUTER, M.D.

EDWIN B. GOODALL, M.D.

RALPH A. HATCH, M.D.

JOHN G. JENNINGS, M.D.

HENRY HAWKINS, M.D.

ROLAND C. MACKENZIE, M.D.

HENRY G. CARROLL, M.D.

Assistant Aural Surgeons

GEORGE L. TOBEY, JR., M.D.

HARRY P. CAHILL, M.D.

LEON E. WHITE, M.D.

OLIVER A. LOTHROP, M.D.

CALVIN B. FAUNCE, JR., M.D.

WILLIAM J. HARKINS, M.D.

FREDERICK L. BOGAN, M.D.

GEORGE H. POIRIER, M.D.

DANA W. DRURY, M.D.

CHARLES T. PORTER, M.D.

JOHN H. BLODGETT, M.D.

FRED A. SIMMONS, M.D.

D. CAMPBELL SMYTH, M.D.

HAROLD G. TOBEY, M.D.

WILLIAM I. WIGGIN, M.D.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Associate Laryngologists

FREDERICK E. GARLAND, M.D.

D. CAMPBELL SMYTH, M.D.

Ophthalmic Clinical Assistants

BARRY H. BURGESS, M.D.

PERCY C. PROCTOR, M.D.

MAUD CARVIL, M.D.

RALPH H. RUGGLES, M.D.

HAROLD B. CHANDLER, M.D.

FRED S. THORNE, M.D.

ROBERT C. CHENEY, M.D.

SAMUEL H. WILKINS, M.D.

Aural Clinical Assistants

CHARLES O. DAY, M.D.

PHILIP E. MELTZER, M.D.

HARRY P. FINCK, M.D.

EDWIN A. MESERVE, M.D.

JAMES C. KIRBY, M.D.

JOSEPH M. SCANLON, M.D.

Assistant Laryngologists

CALVIN B. FAUNCE, M.D.

WILLIAM J. HARKINS, M.D.

WILLIAM I. WIGGIN, M.D.

Assistants

JOHN H. BLODGETT, M.D.

JAMES C. KIRBY, M.D.

EDWARD W. HERMAN, M.D.

GEORGE H. POIRIER, M.D.

V. H. KAZAJIAN, M.D.

CHARLES T. PORTER, M.D.

ISABELLE D. KERR, M.D.

FRED A. SIMMONS, M.D.

HAROLD G. TOBEY, M.D.

Dentist

GEORGE H. WRIGHT, D.M.D.

Pathologist

FREDERICK H. VERHOEFF, M.D.

Roentgenologist

A. S. MACMILLAN, M.D.

Consulting Physicians

DAVID L. EDSALL, M.D.

GERALD BLAKE, M.D.

ROGER I. LEE, M.D.

THEODORE J. EASTMAN, M.D.

C. MORTON SMITH, M.D.

HARRY LINENTHAL, M.D.

FREDERICK T. LORD, M.D.

WILLIAM B. ROBBINS, M.D.

JAMES H. MEANS, M.D.

F. GORHAM BRIGHAM, M.D.

GEORGE R. MINOT, M.D.

PAUL D. WHITE, M.D.

OFFICERS, 1923

Physician to Children

FRITZ B. TALBOT, M.D.

Assistants in the Care of Children

J. HERBERT YOUNG, M.D.

WILLIAM R. P. EMERSON, M.D.

RICHARD S. EUSTIS, M.D.

WARREN R. SISSON, M.D.

Consulting Surgeons

SAMUEL J. MIXTER, M.D.

DANIEL F. JONES, M.D.

CHARLES A. PORTER, M.D.

HUGH WILLIAMS, M.D.

FRANKLIN G. BALCH, M.D.

LINCOLN DAVIS, M.D.

EDWARD P. RICHARDSON, M.D.

W. JASON MIXTER, M.D.

GEORGE W. W. BREWSTER, M.D.

WYMAN WHITTEMORE, M.D.

ROBERT B. GREENOUGH, M.D.

RICHARD H. MILLER, M.D.

Consulting Orthopedic Surgeon

ZABDIAL B. ADAMS, M.D.

Consulting Genito-Urinary Surgeon

J. DELLINGER BARNEY, M.D.

Consulting Neurologists

EDWARD W. TAYLOR, M.D.

JAMES B. AYER, M.D.

GEORGE CLYMER, M.D.

Consulting Dermatologists

CHARLES J. WHITE, M.D.

HARVEY P. TOWLE, M.D.

Consulting Pathologists

J. HOMER WRIGHT, M.D.

OSCAR RICHARDSON, M.D.

Consulting Anesthetists

FREEMAN ALLEN, M.D.

ARTHUR M. DODGE, M.D.

Refractionists

EDWIN B. GOODALL, M.D.

ALFRED C. TRULL, M.D.

RALPH H. RUGGLES, M.D.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

House Staff

Ophthalmic Internes

A. N. LEMOINE, M.D.

E. B. DUNPHY, M.D.

A. E. MACDONALD, M.D.

J. H. WAITE, M.D.

A. F. RAYNES, M.D.

Aural Internes

F. B. SARGENT, M.D.

M. J. O'CONNOR, M.D.

H. C. WILLIS, M.D.

L. E. WHITE, JR., M.D.

L. G. RICHARDS, M.D.

Superintendent of Nurses

MARY COONAHAN, R.N.

Chief Social Worker

JESSIE M. C. HUME, R.N.

Report of the Board of Managers

The volume of work during the past year at the Massachusetts Charitable Eye and Ear Infirmary has been larger than usual, and the results have been very satisfactory. The number of patients in public wards was 4,908, compared with 4,639 last year; and in the private wards 1,568, compared with 1,408. In the Out-Patient Department the total number of old and new patients was 69,154, compared with 67,261 last year.

The Managers are very glad to be able to report that, due to the able management and economy of the Director, Dr. Frederic A. Washburn, and his staff, the total Infirmary expenses, not including extraordinary repairs and improvements, were less than last year, and even after expending over \$26,000 on such improvements (mainly a much needed additional elevator), the year closed without any deficit. The Managers regard this showing as very satisfactory, inasmuch as during the ten years previous there had been a deficit every year, with a total deficit for that period of \$83,379.44, and especially in view of the greatly increased cost of operation compared with previous years. This result has been obtained by greater efficiency in operation, a profit from the private ward, and by an increase of price of board in the Hospital and fees in the Out-Patient Department. The Infirmary, however, has always made it a practice not to charge more than a patient can afford, and no charge is made if the patient is unable to pay anything. A careful inquiry is made, and if it is found that the patient cannot pay anything, no charge is made. The management is convinced that no one fails to receive treatment because of lack of means.

The Medical Social Service Department has had a very active year, 1,530 patients having been referred to it. This number does not include those carried over from last year, to whom service is rendered. This Department keeps in close touch with the Division of the Blind and the State Department of Education, through

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

whose coöperation it is hoped that there may be formed a State Division of the Deaf, so that more adequate care can be given to this class.

The work of the Pathological Laboratory has been unusually active during the past year, and the Managers regret that owing to lack of funds this work, which is so necessary, cannot be adequately maintained.

There are still necessary improvements to be made which have been put off from year to year, as the Managers have not thought the Infirmary could afford to make the outlay. This year it is hoped that the continuing and possibly increased support on the part of the public will enable the Infirmary to make the most needed ones.

The Managers acknowledge with thanks the many donations received during the past year, and also wish to record their grateful appreciation of the devoted service rendered by the entire staff.

R. G. FESSENDEN, *Chairman*,
JAMES DEAN,
ALBERT L. SCOTT,

Committee of the Board of Managers.

Report of the Treasurer

Statement of Income—Receipts and Disbursements

For the year ending September 30, 1922

Hospital Receipts per Director's Report \$231,740.22

DEDUCT:

Hospital Expenses per Director's Report:

General \$233,585.45

Social Service 11,177.84

\$244,763.29

Insurance 1,158.75

Auditors and Bookkeeping 715.00

Publicity Campaign 292.00

Treasurer's Miscellaneous Expense 79.60

Extraordinary Expenses:

New Refrigerating Plant \$2,523.38

Installation of Elevator 18,889.00

Proportion of Expense of Installing Electric Main 1,500.00

Alteration of Office 1,810.82

Kitchen Equipment 938.95

Installation of Doctors' Paging System 629.50

Sprinkler System Expense 29.38 \$26,321.03 \$273,329.67

Operating Deficit (i.e., Excess of Operating Expense

over Receipts from Patients, etc.) \$41,589.45

ADD:

Income from Investments \$28,813.66

Interest on Deposits 689.40

Brigham Estate 1,000.00

Ashton Estate 2,600.00

Committee of Permanent Charity Fund, Inc. 1,750.00

Gifts 7,384.48

Income from Brooks Fund for Social

Service \$250.00

Income from Sears Fund for Social

Service 960.00

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Committee of Permanent Charity		
Fund, Inc., for Social Service	\$1,500.00	
Gifts for Social Service	1,900.00	
	<hr/>	\$4,610.00
Income from Aural Surgeon's Fund (balance to principal)	325.46	\$47,173.00
	<hr/>	
EXCESS OF INCOME RECEIPTS OVER DISBURSEMENTS FOR THE YEAR,		<u>\$5,583.55</u>

SOCIAL SERVICE WORK

RECEIPTS:		
Income from Sears Fund	\$960.00	
Income from Brooks Fund	250.00	
Committee of the Permanent Charity Fund, Inc.	1,500.00	
Gifts	1,900.00	
	<hr/>	\$4,610.00
DISBURSEMENTS:		
Salaries of Social Service Workers	\$9,189.92	
Salaries of Clerical Workers	867.49	
Stationery	127.09	
Postage, Telephone, Sundries	867.89*	
Car Fares	125.45	
	<hr/>	\$11,177.84

*This amount includes expenditures which have been charged to the following funds:

Glasses Fund	\$98.60
Special Emergency Fund	124.50
Relief Fund (given by the Permanent Charity Fund)	67.76
	<hr/>
	\$290.86
	<hr/>

HENRY PARKMAN,
Treasurer.

PATTERSON, TEELE AND DENNIS,
Accountants and Auditors.

Report of the Director

TO THE BOARD OF MANAGERS:

Gentlemen: I have the honor to submit my report for the year ending September 30, 1922.

The following table shows the pay and free days of patients admitted to the hospital, exclusive of the private ward, for the last five years:

1918		1919	
Free	Full Rate	Free	Full Rate
30,388	12,020	21,649	15,723
(42,408)		(37,372)	
1920		1921	
Free	Full Rate	Free	Full Rate
20,920	19,671	29,459	16,963
(40,591)		(46,422)	
1922			
	Free		Full Rate
	25,792		19,325
	(45,117)		

These figures are obtained by taking the amount of money received for board of patients in public wards and dividing that figure by the full rate of board prevalent at the time. This gives the number of days of paying patients reckoned as though they were paying full rates. By subtracting this figure from the total of patients' days we get the number of free days.

We have made the following extraordinary improvements in plant:

1. Completed refrigerating boxes and ice plant.
2. Enlarged and improved the offices.
3. Installed an additional elevator which runs to the roof.
4. Added a doctors' call system (loud-speaking telephone).
5. Installed gas-cooking appliances in kitchen.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

The chief physical needs remaining are:

1. A connecting building between the Infirmary and the Out-Patient Building of the Massachusetts General Hospital.
2. Completion of improvements in kitchen, including new floor and tiling of walls, and new apparatus.
3. Additional operating room, private floor.
4. Installation of additional plumbing near wards.
5. Rewiring hospital for electricity.

With the exception of the first of these items, the sums involved are not large, and it is believed that the Managers would be justified in making the expenditure in the immediate future.

The connecting building mentioned above in Item 1 is sorely needed to give the Infirmary its maximum efficiency. A few of these reasons follow:

- A. The easiest and freest means of communication between the two hospitals for the patients, physicians, nurses and others should be furnished. Eye, ear and throat diseases are frequently symptoms of a general disease. Easy examination by and consultation with other departments is essential for the best interest of the patient. Our Throat Department now has its beds in the Infirmary and its Out-Patient Department at the Massachusetts General Hospital. There should be a combination of the Out-Patient Departments of the two institutions, with a central admission room in the new building.
- B. The Infirmary's service would be much improved if it had the major part of its first floor, now occupied by its Out-Patient Department, for other purposes. The administrative offices should be there, and not on the second floor as they are now. The Infirmary will in time doubtless have on its staff paid nearly full-time physicians, men who will devote much time to teaching and research. Offices and laboratories for such men may be installed in this space. We need an emergency ward.

Briefly stated, these are the reasons for the desired building. The Infirmary's share, if it paid a half of the cost, would probably

REPORT OF THE DIRECTOR

be nearly \$200,000. I hope the Managers will give this need their best thought and make plans to obtain the requisite money.

It is pleasant to mention to the Managers the particularly able and faithful service of Miss Sophia B. Eastman, R. N., Assistant to the Director, and to thank her and other loyal officers and employees.

Attention is invited to appended reports and tables of statistics.

Respectfully submitted,

FREDERIC A. WASHBURN, M.D.

Director.

From October 1, 1921, to October 1, 1922

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REPORT OF THE DIRECTOR

SUMMARY FOR TWELVE MONTHS	1922	1921
Salaries and Wages	\$135,047.25	\$134,901.34
Supplies	109,716.04	121,301.13
Total Maintenance Expenses	\$244,763.29	\$256,202.47
Extraordinary Expenses	26,321.03	9,031.02
Total Hospital Expenses	\$271,084.32	\$265,233.49
Total Hospital Receipts	231,740.22	219,895.69
Excess of Expenses over Receipts	\$39,344.10	*\$45,337.80

*To make this figure agree with that in last year's report, subtract \$9,031.02 extraordinary expenditures, which appeared only in Treasurer's report for 1921.

OPERATING EXPENSES		1922	1921
SUPPLIES			
General Administration	.. .	\$6,972.94	\$5,894.87
Apparatus and Instruments	.. .	1,849.92	1,580.87
Medical and Surgical	.. .	13,744.57	14,146.03
Wasserman Tests	.. .	193.00	176.00
X-Rays	.. .	1,413.50	846.37
Optical	.. .	12,377.37	14,744.40
War Tax on Glasses	.. .	440.81	1,297.97
Housekeeping and Kitchen	.. .	8,640.58	4,490.18
Laundry	.. .	519.51	702.38
Meat, Poultry and Fish	.. .	11,274.16	13,363.11
Fruit and Vegetables	.. .	3,520.18	2,834.82
Bread and Flour	.. .	1,345.51	1,910.53
Milk and Cream	.. .	7,896.93	10,625.87
Groceries	.. .	6,638.82	8,135.27
Butter and Eggs	.. .	4,854.27	6,342.19
Gas	.. .	677.13	660.81
Electric Lighting, Nurses' Home	.. .	606.62	591.67
Heat, Light and Power, Hos- pital Buildings	.. .	14,147.18	15,308.21
Ice	.. .	326.20	3,024.30
Fuel, Kitchen	.. .	748.52	1,015.84
Fuel, Nurses' Home	.. .	2,075.61	1,926.34
Water, Hospital Buildings	.. .	1,445.40	1,223.64
Water, Nurses' Home	.. .	502.92	380.16
Maintenance, Property and Plant	.. .	4,495.32	7,181.12
Refunds	.. .	1,932.03	1,922.52
Miscellaneous	.. .	1,077.04	975.66
TOTAL		\$109,716.04	\$121,301.13

Report of the Work of the Gardner Building

During the past year 221 patients were treated in the Gardner Building. Of these, 38 were treated for gonorrheal ophthalmia neonatorum, and 22 for non-gonorrheal ophthalmia neonatorum. At the time of entrance the cornea was involved in eight cases of gonorrheal ophthalmia neonatorum, two of these being clear on discharge. The cornea was not involved in any case of ophthalmia neonatorum after admission.

There were 13 patients treated for gonorrheal suppurative conjunctivitis, and 20 for non-gonorrheal suppurative conjunctivitis. At the time of entrance the cornea was involved in five cases of gonorrheal suppurative conjunctivitis, none of these being clear on discharge. At the time of entrance the cornea was involved in five cases of non-gonorrheal suppurative conjunctivitis, none of these being clear on discharge. The cornea was involved in two cases of gonorrheal conjunctivitis after admission.

There were also 29 patients treated for trachoma.

There were 24 patients transferred to Gardner Building for erysipelas, impetigo, and other infectious diseases which manifested themselves in the general wards of the hospital.

REPORT OF THE SUPERINTENDENT

Statistics

House Patients

Number of patients treated in ophthalmic wards	1,508
Number of patients treated in aural wards	3,400
Number of patients treated in private wards:	
Ophthalmic, 350 }	
Aural . . . 1,218 }	1,568
	<hr/>
	6,476
Average number of patients treated daily in the public wards . .	123+
Average number of patients treated daily in the private wards . .	26+
Average number of days patients remained in the hospital . . .	8+
*Number of days board furnished free	25,792
*Number of days board paid at full rate in public wards	19,325
Number of days board paid in private ward	9,835
	<hr/>
	54,952
Cost per patient public and private wards per week	\$28.53
Cost of subsistence per inmate per day	42+
Number admitted free	392
Number admitted at less than \$10.50 per week	592
Number admitted at \$10.50 per week	625
Number admitted at \$15.00 per week	101
Number admitted at \$17.50 per week	21
Number admitted at \$21.00 per week	3,177

PRIVATE PATIENTS

Number admitted at \$28.00 per week	981
Number admitted at \$31.50 per week	3
Number admitted at \$35.00 per week	7
Number admitted at \$42.00 per week	10
Number admitted at \$49.00 per week	520
Number admitted at \$56.00 per week	18
Number admitted at \$63.00 per week	29
	<hr/>
	6,476

*These figures are obtained by taking the amount of money received for board of patients in public wards, and dividing that figure by the full rate of board prevalent at that time. This gives the number of days of paying patients, reckoned as though they were paying full rates. By subtracting this figure from the total of patients' days, we get the number of free days.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

CONDITION OF PUBLIC WARD PATIENTS ON DISCHARGE

Relieved	4,637
Not relieved	100
Died	42
Otherwise discharged	52
Remaining in hospital September 30, 1922	77
	<hr/>
	4,908

Out-Patient Department

New patients treated:

Ophthalmic	15,172
Aural	9,547
	<hr/>
Total	24,719

Old patients treated:

Ophthalmic	26,159
Aural	18,276
	<hr/>
Total.	44,435

Total visits in Out-Patient Department	69,154
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Report of Post-Graduate Training School for Nurses

The Post-Graduate Training School for Nurses of the Massachusetts Charitable Eye and Ear Infirmary is in its twenty-ninth year.

There is a total of six hundred and fifty-two graduates.

In the school year of 1921-1922 fifty-seven students entered the class; fifty-four students graduated; three failed to graduate; sixty-nine applications were made.

The affiliations formed by the Infirmary with the Training Schools for Nurses of the general hospitals remain as in 1920; none of the affiliated schools have been able to increase the number of students sent to the Infirmary; two have not been able to send their full number during the summer months, but on the entrance of the fall classes, one school has resumed its full number, and the second will do so as soon as possible.

The Infirmary is indebted to the student nurses for the kindly spirit in which they have assisted us in our contact with them, for the enthusiasm with which they have done the work, and for their expressions of appreciation of our efforts in their behalf.

An end much to be desired is a greater number of students from the schools already affiliating or additional affiliations; the Infirmary has the material and facilities for teaching a much larger group than is at present enrolled.

The need of graduate nurses who have had special training in eye, ear, nose and throat nursing is keenly felt in many parts of the country; the Training School Office has frequent calls for such workers and is not able to supply the assistance desired.

The reason further affiliations cannot be brought about is that general hospital training schools are feeling the effects of the very inadequate number of women applying for nurse training. While there is improvement in the number of applicants, it is not great enough for the general hospitals, to spare from the work of their

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

own wards all students who desire eye, ear, nose and throat instruction as one of the elective courses.

No radical change has been made in the method of teaching, nor in the matter taught; close supervision at the bedside has made it possible to consistently apply the theory taught in the classroom to the practical work done on the patient.

Greater emphasis is laid on the nurses' work as a disease-preventive agent; the State of Massachusetts, in its handling of ophthalmia neonatorum has taught us how truly the ounce of prevention is worth the pound of cure, and gradually the nurse is realizing how valuably her special training may be used for the conservation of sight and hearing.

It is interesting to record that the Rockefeller Foundation, in its notable report on Nursing Education published this year, concludes that much of the routine and non-educational work in caring for the sick can be successfully carried out by the employment of the attendant or nurse-aide, thereby economizing the time and strength of the student nurse for important and educational nursing.

The employment of attendants, or nurse-aides, for routine ward work has always been the policy of the Infirmary; and this practice is rapidly becoming inaugurated by general hospital training schools.

This same survey concludes that a forty-eight hour week, preferably a forty-four hour week, inclusive of Class work, should be the working time of the student nurse. To meet this recommended time-allowance would necessarily place a heavy financial burden on the resources of the institution in which the student is in training.

The consensus of opinion is that nurse training is educational work; that it belongs in the Department of Education, and should be financed from educational grants.

It is with regret that the resignation of Miss Harriet L. Harris has been received; her work in the teaching of the student nurses has been ably done and her loss will be felt. Miss Harris leaves to take charge of the Nursing Department of the Newark Eye and Ear Hospital.

POST-GRADUATE TRAINING SCHOOL REPORT

I extend my cordial thanks to the many friends who have assisted in the care and teaching of the nurses; and for the generous provision for their material comfort.

My grateful appreciation is extended to the Trustees and Director of the Infirmary for the year's vacation so kindly given to me.

MARY COONAHAN, R.N.,
Superintendent of Nurses.

Report of the Medical-Social Service Department

October 1, 1921—October 1, 1922

It is gratifying to realize that the Medical-Social Service Department is becoming more and more an integral part of the Infirmary, a fact due to the recognition, by the Medical Staff, of the social, as well as the medical needs of the patients.

The work has assumed a distinctly Public Health phase, hence the necessity for close coöperation with local Health Boards and agencies.

The Department is run upon a strictly non-sectarian basis, and in conjunction with all departments of the Infirmary. Its main functions are:

- First:* To follow up all cases referred from clinic or wards for the purpose of completing the medical treatment.
- Second:* To work in close coöperation with boards of health, public health agencies, etc., in an effort to minimize social diseases.
- Third:* To act as a means of interpretation between patient and physician, and in this way promote a better understanding of conditions, both medical and social.
- Fourth:* To maintain a high standard of educational work in the homes along the lines of elementary hygiene and common standards of living.
- Fifth:* To work on the basis of prevention of blindness and deafness.
- Sixth:* To arrange for readjustment and education of patients handicapped from eye or ear diseases.

A course of lectures and demonstrations for Public Health Nurses was given at the Infirmary from January 18 to April 12,

REPORT OF MEDICAL-SOCIAL SERVICE DEPARTMENT

1922, the average daily attendance being twenty-two, while twenty-three distinct organizations were represented.

Special acknowledgment is made of the coöperation of the Boston Wet Nurses' Directory in supplying breast-milk when mothers' milk could not be obtained, and when natural feeding was considered absolutely necessary for babies of lowered vitality.

Owing to the reduction in the number of applicants to the Boston Nursery for Blind Babies, the Infirmary was given the privilege of entering small children suffering from Phlyctenular Keratitis, for convalescent care for periods varying from one to six months. Twenty children of this type have been given this opportunity, which has been of inestimable value in the fight against impairment of vision.

Through the kindness of the Trustees of the Permanent Charity Fund and Mrs. Richard C. Curtis, Chairman of the Ladies' Visiting Committee, a Working Fund of \$700 has been at the disposal of the workers to be used for convalescent care, glasses, etc.; said fund has materially aided in the completion of the medical treatment of patients.

Thanks are extended to the Ladies' Visiting Committee for the financing of a much-needed Phlyctenular Keratitis worker and of a half-time worker in the Aural Department, the latter to begin work in November of this year.

The work of the past year was handled by three full-time Case Workers, a Ward Worker, a Medical-Follow-Up Worker, a Phlyctenular Worker for nine months, a Research Worker for three months of the year, a Stenographer, and a Chief Worker.

During the year 1,530 patients were referred to the Department for various types of service exclusive of the Refers, Follow-Up, and of those reported to the Division of the Blind.

In addition to the above-mentioned, a large group of patients received some slight service of which no record was kept. Visits to homes numbered 1,302, and 128 visits were made to agencies, while 290 were referred to Public Health Nurses for medical supervision. The services of said nurses have been given most generously, and have hastened the recovery of the patients. Letters numbering 5,085 were sent out, exclusive of the Medical-Follow-Up.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

The Department still works in close relationship with the Division of the Blind, and reports, daily, low-visioned or blind patients, in order that they may get what is best along the line of special education or work, so that they may become at least partially, if not wholly self-supporting. Three hundred and twenty-eight patients belonging to this class were reported to above-named organization, said number not being included in the group of 1,530.

The Medical-Follow-Up Worker personally steered to the Massachusetts General Hospital clinics those patients referred from the Eye Clinic who needed examination or treatment in a general hospital. Patients numbering 1,341 passed through her hands; 8,551 individuals were listed on the Follow-Up, of which number 5,568 were carried from the previous year; 978 were discharged, while 47 were referred for intensive case work. Post cards or letters numbering 1,463 were sent out, and 182 home visits were made on this group.

General Work

The routine of the General Department was carried by the worker in Gardner Building until the appointment on January 9th of the special Phlyctenular Worker. By this new arrangement it will be possible to do intensive work on a research basis on this much-neglected and interesting group along the line of prevention of recurrences.

Interstitial Keratitis

As in the past, the children suffering from Interstitial Keratitis have been kept in one group, and the treatment worked out jointly between the Infirmary and the South Medical Department of the Massachusetts General Hospital, with most gratifying results. One hundred and seventy-eight patients belong to this group. Not only have these patients benefited, but through the untiring energy and interest of the worker in charge, the individual members of the families have had routine Wassermann tests, and, when neces-

REPORT OF MEDICAL-SOCIAL SERVICE DEPARTMENT

sary, put under treatment as a preventive measure. Some valuable medical and social facts have been secured, and a Survey of Interstitial Keratitis is now in the making.

Ophthalmia Neonatorum

It is a tribute to the efficiency of the Public Health Agencies that the number of Ophthalmia Neonatorum cases remain low. Fifty-seven babies were referred for intensive social work. Of this group, thirty-one were under fourteen days old and twenty-six were over that age. Thirty-three had positive gonococcus smears, twenty-four were negative, and three questionable. Of this group, nine were illegitimate. In all positive cases, where possible, parents were examined by private physicians or at the Massachusetts General Hospital clinic and put under treatment, if necessary. On discharge, babies were referred back to private physicians, Boards of Health, or to the nearest Baby Welfare Station for supervision of feeding and general condition. One infant with damaged cornea was reported to the Division of the Blind.

Ward Work

The intensive work done in the Wards was confined largely to special children in Bradlee. Close follow-up was given in the homes; and, thanks to the sympathetic understanding of the Children's Agencies of Boston, many of the little people were given adequate convalescent care. Through the thoughtfulness of friends, the wards were supplied with Christmas trees, greens, toys, etc., while the Flower Mission and private individuals have added greatly to the cheer by sending frequent gifts of flowers and fruit.

Aural Work

The work of the Aural Department naturally falls into two sections: the General and Deaf Groups. These in turn become intensive or non-intensive cases.

In order to relieve the pressure in the General Group, a half-time worker has been appointed to begin work on November 1st.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

The greatest need is the equipment of a Nursery or Convalescent Home for young children who are too well to remain in the hospital and too sick to be returned to their homes. At present, no such place exists, and it is time that the public be brought face to face with this fact.

Deaf Group

Following the custom of former years, the totally or partially deaf children were automatically referred from clinic. A better classification of the deaf is being obtained, so that the hard-of-hearing or deaf child may receive the type of training best fitted to his needs. It is with pleasure that we acknowledge the co-operation of the State Department of Education and the Speech Readers' Guild, for through their interest and help we look forward to the formation of a State Division of the Deaf, and in this way promote a more adequate form of education, to include vocational training, and in conjunction with it a Placement Bureau, for only in this way can the deaf person take his rightful place in the community.

JESSIE M. C. HUME,
Chief Social Worker.

Report of the Pathological Laboratory

During the past year the activities of the laboratory have been unusually great, owing to the larger number of men who have been studying here. Dr. Verhoeff and Dr. Lemoine have continued their studies of phacoanaphylactic endophthalmitis and reported their results before the International Congress of Ophthalmology in Washington. They have been able to show that a patient who is hypersensitive to lens protein may be desensitized and successfully operated upon for immature cataract by the ordinary method. They are now also investigating the effects of optochin upon the eye and the possibility of checking intraocular infections by injecting this substance into the vitreous body of infected eyes. Dr. Verhoeff and Dr. Friedenwald have studied the histopathology of blepharochalasis and have discovered some lesions in this condition that have not hitherto been described. They have also investigated the effect of bile upon the cornea. Dr. Friedenwald has carried out an elaborate investigation of herpes fibrilis and has obtained some important results. Dr. Cheney has investigated the bactericidal properties of Argyrol. Dr. Li of the Peking Union Medical College, who has been sent here by the Rockefeller Foundation to study the pathology of the eye, is now investigating ring sarcoma of the iris.

F. H. VERHOEFF,
Pathologist.

Report of Ophthalmic Department

During the past year the work of the Ophthalmic Department, both in the wards and in the Out-Patient Department, has proceeded along the usual lines. For several years the number of cases of Ophthalmia Neonatorum admitted to the Gardner Building has fallen off. This is due to two causes — first the State law, second the Follow-Up system of the Public Health Association.

The examination of school children is one of the problems to be considered. In the Fall these children are brought in large numbers to the Infirmary by the School Nurses. Saturday being a school holiday, the Infirmary is swamped by these children. An effort is now being made to divide this work so that they will come on other days. Among these children are found many with defective sight, and those below a certain standard are reported to the Division for the Blind and are placed in special classes.

The Phlyctenular Clinic, abandoned during the war, has been reestablished, and is working in coöperation with the Children's Department of the Massachusetts General Hospital.

The study and treatment of cases of Interstitial Keratitis continues with the assistance of the South Medical Department.

That the Infirmary is able to carry on this valuable work among children, is due to the efficient help of the Social Service Department, and it seems fitting at this time to speak of the good work done by Miss Harriet L. Foss, with the interstitial cases.

Her resignation from the Social Service Department is a loss to the Infirmary.

Through the generosity of Mr. M. D. Flattery an instrument devised by Prof. W. T. Bovie, has been installed in the Out-Patient Department. This instrument may be called a Light-Testing Apparatus for the study of "light sense" and "light difference," and it is hoped that it may lead to the early recognition of certain diseases of the eye.

ALEXANDER QUACKENBOSS, M.D.,
FRED M. SPALDING, M.D.,

Ophthalmic Chiefs of Service.

Report of Aural Department

The Aural Department is called upon to care for two distinct and widely varying types of illness. There is the problem of the individual who is afflicted with deafness; and at first thought this would seem to be the whole excuse for the existence of the department. Once inside the hospital, however, one is at once impressed with the vast number of major surgical cases resulting from infections of the ear. To recognize and properly care for these different needs — practically a dual role — it has been necessary to build up a strong Out-Patient personnel as well as a highly efficient House service.

For many years it has been generally known that children with diseased tonsils and adenoids are more subject to deafness and kindred ear diseases than the normal child. During all these years this Institution has taken an advanced stand on this subject. In accordance with the teachings of our pioneer aurists, literally thousands upon thousands have submitted to operations here. The benefit of such service to the community is immeasurable. That this benefit is appreciated is shown by the increasing numbers of children sent for operation. This is due to the coöperation of school physicians and nurses. All school children must by law have the hearing examined annually. The deaf, or slightly deaf, are treated and many are cured. It must be admitted that the demand upon our facilities for this work is now a serious tax, so serious that at times a "waiting-list" has had to be established.

Each epidemic of colds leaves its trail in the Infirmary for months afterwards. One of the most common complications is infection of the middle ear and mastoid. During the winter months it is often necessary to perform six or more mastoid operations a day. Each case must be dressed daily. This alone calls for a vast amount of work upon the part of the House Staff. Before many days have passed, it is impossible to take in urgent cases unless some of the less seriously ill can be discharged to the Out-

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Patient Department. If possible, more beds should be assigned to this Department during the Winter.

During the past year progress has been made in the study of the static labyrinth in connection with the diagnosis of cerebral and cerebellar tumors. This work has been done in collaboration with the Neurological Department of the Massachusetts General Hospital. Several of our recent graduates have undertaken noteworthy investigations in this subject; these will be reported in the literature in due course. Other contributions have been made by various members of the Aural Staff.

For several years a special course for graduates has been conducted at the Infirmary. This course has been given directly in connection with the Post-Graduate work of the Harvard Medical School. It has proven very popular with specialists throughout the country. This affords an opportunity for a larger number of physicians to profit by the experience of our clinics and operating rooms than can be accommodated in the relatively few positions as House Officer.

EUGENE A. CROCKETT, M.D.,
PHILIP HAMMOND, M.D.,

Aural Chiefs of Service.

Report of Throat Service

The Throat Service at the Infirmary during the past year played its usual prominent part in preventive medicine by operating 2,688 cases of tonsils and adenoids.

The Throat beds for house cases have relieved the congestion of the operating room at the Massachusetts General Hospital, made it possible to treat emergency cases better, and other cases more quickly. The House Service has added greatly to the standing of the Throat Department in the surgical specialities.

The staff maintains its former interest in malignant disease of the upper jaw. The exhibition of successful cases at the meeting of the American Medical Association two years ago, and at the Clinical Congress of Surgeons this Summer, brought forth very favorable comment. The Throat Service has done pioneer work in this type of case.

The House Officers are taking their Friday night work at the Medical School in Anatomy even more seriously. More members of the staff are availing themselves of the opportunity to study there.

There is still a very active demand for the Graduate Courses offered by members of the staff, namely the courses given by Dr. Barnes in Submucous Resection of the Septum, and the Anatomy Course given in March by Dr. Mosher and repeated in September by Dr. Berry.

All X-ray plates of the head are now taken by Dr. Macmillan at the Infirmary. His plates have proved to be exceptionally fine. He has generously given much time to the teaching of visiting specialists and has taken part in the regular graduate courses. He has X-rayed a series of one hundred and thirty skulls from the collection at the Medical School. The findings are being tabulated by Dr. Macmillan, Dr. Kirby and Dr. Berry. The esophagus and stomach were X-rayed in a series of ten babies dead at birth. This was done in connection with Dr. Mosher's anatomical studies of the esophagus. Some new findings were recorded.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

The number of lacrimal sac cases operated is steadily increasing. This work bids fair to settle a question which has long been a matter of dispute among ophthalmologists.

The extra mural activities of the members of the staff the past year consisted of a paper on radium at St. Louis by Dr. Greene, a paper at Minneapolis in September, a paper in Scranton, Pa., in October, and an esophagus exhibit at the Medical School for the Clinical College of Surgeons by Dr. Mosher. Morning and afternoon clinics were given by the various members of the Throat Staff, and a lecture at the Medical School, for the visiting surgeons of the Congress. Dr. Wright stirred up special interest at the Congress by a paper on "Iritis from Focal Infection Originating in the Teeth and Jaw."

In connection with the clinics at the Infirmary for the Clinical Congress there was an exhibition of instruments designed by members of the staff, and an exhibition of X-ray plates of the accessory sinuses, the mastoid and the esophagus at birth.

HARRIS P. MOSHER, M.D.,
Laryngological Chief of Service.

Report of the X-Ray Department

Positive	1,463
Negative	100
Treatments given	250
	<hr/>
	1,813

DR. A. S. MACMILLAN,
Roentgenologist.

Scientific Papers Published by the Surgical Staff during the Year 1921-1922

- “Types of Pneumococcus Found in Corneal Ulcers.” By Dr. Robert Cartwright Cheney, International Congress of Ophthalmologists, April 1922, Washington, D. C.
- “Indications for Opening the Mastoid Cortex.” By Dr. Francis P. Emerson. *The Laryngoscope*, April, 1922.
- “Accessory Sinus Blindness, Differential Diagnosis and Operative Technic.” By Dr. Leon E. White. *Boston Medical and Surgical Journal*, Vol. 185, No. 5, Aug. 4, 1921. *The Laryngoscope*, Vol. xxxi, No. 8, August, 1921.
- “The Etiology and Pathology of Diseases of the Accessory Sinuses Accompanied by Impairment of Vision.” By Dr. Leon E. White. *Boston Medical and Surgical Journal*, Vol. 185, No. 16, Oct. 20, 1921. *Transactions Amer. L. R. & O. Soc.*, 1921; *The Laryngoscope*, Vol. xxxii, No. 6, June, 1922.
- “Aëration of the Posterior Accessory Sinuses in Acute Optic Neuritis.” By Dr. Leon E. White, New York Academy of Medicine, Oct. 25, 1921. *The Laryngoscope*, Vol. xxxi, No. 5, May, 1922; *Boston Medical and Surgical Journal*, Vol. 186, No. 6, Feb. 9, 1922.
- “Care of the Eyes.” By Dr. George S. Derby, Transaction of the Section of Hygiene, National Educational Association, 1922.
- “Diphtheria of Larynx, Trachea, and Bronchi, Associated with Papilloma of Larynx.” By Dr. Edwin A. Meserve. *Boston Medical and Surgical Journal*, Vol. 185, No. 19, pp. 568-570.
- “Endophthalmitis Phacoanaphylactica.” By Dr. F. H. Verhoeff and Dr. A. N. Lemoine. Transactions International Congress of Ophthalmology, Washington, D. C., April, 1922.
- “Hypersensitiveness to Lens Protein. Patient Desensitized and Successfully Operated upon for Immature Cataract.” By Dr. F. H. Verhoeff and Dr. A. N. Lemoine. *American Journal of Ophthalmology*, 1922, Vol. 5, p. 700.
- “Eye Magnets.” By Dr. Walter B. Lancaster. Transactions of the American Academy of Ophthalmology and Oto-Laryngology.
- “Liver Tunnel and Cardio-spasm.” By Dr. Harris P. Mosher. Reprint from *The Laryngoscope*, St. Louis, May, 1922. Chairman’s address read at Atlantic City, June, 1921, at the American Laryngological Association.

Report of Ophthalmic Department

House Operations

CONJUNCTIVA		Tumor	8
Cauterization	1	Ulcer of cornea	2
Conjunctival flap	48	Enucleation with implanta-	
Excision of granulation tissue	2	tion of fat	1
Excision of pinguicula . . .	2	Enucleation with implanta-	
Stripping	6	tion of glassball	25
Transplantation of pterygium	6	Enucleation with Magitot's im-	
Transplantation of symblepharon	6	plantation of cartilage . .	1
Total	71	Total	98
CORNEA		EVISCKERATIONS	
Cauterization	21	Evisceration, simple	4
Curetment	2	IRIS	
Excision of tumor	1	Elliot trephine	62
Infiltration of cornea with India		Excision of prolapsed iris . .	25
ink	1	Iridectomy (unclassified) . .	1
Paracentesis	8	Iridectomy:	
Paracentesis with optochin in-		for glaucoma	74
jection	2	for iridocyclitis	1
Removal of foreign body . .	4	for prolapsed iris	6
Removal of specimen for path-		for uveitis	1
ological examination . . .	1	optical	25
Saemisch	16	preliminary	19
Suturing of wound	4	Iridectomy with conjunctival flap	4
Total	60	Iridotaxis	6
ENUCLEATIONS		Iridotomy	13
Enucleations, simple, for:		LaGrange operation	2
Abscess of orbit	1	Removal of foreign body iris .	3
Burn of cornea	3	Section of synechia	9
Disorganized globe	9	Total	251
Following cataract extraction	1	LACRIMAL APPARATUS	
Glaucoma	18	Agnew's operation	2
Injury	12	Curettage of fistula	1
Intraocular hemorrhage . .	1	Extirpation of tear sac . . .	37
Iridocyclitis	7	Incision of abscess	8
Iritis	1	Intranasal dacryocystotomy .	3
Panophthalmitis	2	Suturing of wound	1
Ruptured globe	1	Trichloracetic cauterization .	6
Separation of retina	2	Total	58
Staphyloma	3		

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

LENS		Tansley-Hunt	
Cataract extraction:		Removal of foreign body . .	3
Housain	19	Removal of granuloma — in-	
in capsule	39	ner canthus	1
in capsule with iridectomy.	35	Removal of verruca of lid . .	1
linear	31	Spencer Watt's transplanta-	
simple.	4	tion	2
unclassified	138	Suturing.	9
with iridectomy	161	Tarsectomy	2
with iridectomy and con-			
junctival flap	3	Total	101
Discission	270	MUSCLES	
Extraction of lens for disloca-		Advancement of:	
tion	5	external rectus	86
Total	705	internal rectus	16
		levators	4
		superior rectus	1
		Resection of inferior oblique .	1
		Suturing of internal rectus .	1
		Tenotomy of:	
		external rectus	20
		inferior oblique	2
		inferior rectus	2
		internal rectus	97
		superior rectus	3
		Tucking of external rectus . .	6
		Total	239
		ORBIT	
		Excision of cyst of orbit . . .	5
		Exenteration of orbit	4
		Extirpation of fat.	1
		Exploration and drainage of	
		orbit	1
		Incision and drainage of orbi-	
		tal abscess	2
		Marsupialization of orbit . .	1
		Plastic	18
		Plastic with skin graft. . . .	4
		Removal of glassball	2
		Skin graft	4
		Wheeler's restoration of socket	4
		Total	46
LIDS			
Ammon's operation for epi-			
canthus	2		
Canthoplasty	4		
Canthotomy	2		
Ectropion:			
Kundt's	1		
Snellen	7		
Unclassified	6		
Entropion:			
Celsus.	1		
Gaillard-Arlt	4		
Green	1		
Snellen	1		
Unclassified	4		
Excision of canthoplasty. . .	1		
Excision of tarsus.	2		
Excision of tumor	5		
Extirpation of cilia	3		
Grattage	1		
Incision of abscess	1		
Incision of chalazion	1		
Incision of hordeolum	2		
Plastic	22		
Ptosis:			
Hess's	3		
Modified pannus	1		
Motaïs	2		
Pagenstecher	2		

REPORT OF THE OPHTHALMIC DEPARTMENT

SCLERA		MISCELLANEOUS	
Cautery	2	Attempted removal of foreign body, globe	2
Operation for separation of retina	2	Extraction of teeth	15
Paracentesis of sclera	16	Incision of cervical abscess	2
Sclerotomy	9	Removal of foreign body, anterior chamber	2
Suturing	1	Removal of foreign body, globe	56
<hr/>		Removal of nevus of eye	1
Total	30	Removal of papilloma of caruncle	1
		Removal of specimen for pathological examination	2
VITREOUS		Removal of teratoid tumor	1
Excision of vitreous	2	Removal of wen of brow	1
Removal of foreign body	2	<hr/>	
<hr/>		Total	83
Total	4	Total operations	1,750

Out-Patient Operations

Agnew's incision	5	Incision of superficial infection	
Conjunctival flap	1	of lid	1
Cauterization of ulcer	2	Incision of tear sac	18
Curettage of ulcer	10	Incision of wen of lid	1
Curettage of xanthoma	2	Probing of lacrimal sac	70
Ectropion:		Puncturing of anterior cham-	
Gaillard-Arlt	2	ber	1
Snellen suture	8	Removal of calcareous deposits	
Enucleation	4	of conjunctiva	4
Evisceration	2	Removal of concretions of con-	
Excision of calcareous deposits		junctiva	2
of lid	1	Removal of epithelium of cor-	
Excision of granulations of		nea	1
conjunctiva	1	Removal of foreign body of	
Excision of granuloma	2	conjunctiva	69
Excision of growth of lid	2	Removal of foreign body of	
Excision of growth of sclera	1	cornea	1,321
Excision of mucus membrane.	1	Removal of foreign body of lid	168
Excision of tumor of brow	2	Removal of foreign body of	
Excision of tumor of inner		sclera	2
canthus	1	Removal of granulation tissue	13
Incision of abscess of inner		Removal of growth of inner	
canthus	1	canthus	1
Incision of abscess of lacrimal		Removal of growth of orbit	2
duct	12	Removal of milium	1
Incision of abscess of lid	28	Removal of papilloma	3
Incision of bleb of conjunctiva	1	Removal of sebaceous cyst	10
Incision of canaliculus	8	Removal of siderosis of cornea	2
Incision of chalazion	318	Removal of specimen for path-	
Incision of cyst of conjunctiva	2	ological examination	3
Incision of cyst of eyebrow	1	Removal of tumor of lid	2
Incision of cyst of inner canthus	1	Removal of verruca	13
Incision of cyst of lid	9	Saemisch	2
Incision of comedo	1	Suturing of cornea	1
Incision of furuncle of brow	1	Suturing of lid	3
Incision of furuncle of nose	1	Transplantation of pterygium	27
Incision of hordeolum	122		
Incision of pimple of lid	1		
		Total	2,295

Report of Aural Department

House Operations

AURICLE

Aspiration of hematoma	4
Incision of abscess	3
Incision of preauricular abscess	1
Plastic	3
Removal of supernumerary auricle	2
Suturing	1
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Total	14

MEATUS

Incision of furuncle of canal	12
Removal of foreign body	1
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Total	13

TYMPANUM

Incision of membrana tympani	82
Ossiculectomy	2
Removal of cholesteatome	3
Removal of granulations	1
Removal of growth from eustachian tube	1
Removal of membrana tympani	1
Removal of polypus	54
Stapedectomy	1
<hr/>	
Total	145

MASTOID REGION

Biopsy	1
Curettage of radical mastoid cavity	7
Decompression	7
Excision of jugular vein	1
Excision of postaural gland	1
Exploration for brain abscess	6
Exploratory operation for removal of specimen from mastoid	1
Incision and drainage of cerebellar abscess	1

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Incision and drainage of tempero-sphenoidal abscess	5
Incision of postaural abscess	21
Ligation of jugular	23
Plastic for closure of postaural fistula	10
Radical mastoid	55
Radical mastoid with extradural abscess	1
Radical mastoid with primary skin graft	10
Removal of keloid from mastoid wound	1
Removal of tumor from mastoid	1
Simple mastoid	332
Simple mastoid with Bezold's abscess	3
Simple mastoid with extradural abscess	2
Simple mastoid with perisinus abscess	17
Simple mastoid with postaural abscess	2
Simple secondary mastoid	42
Skin graft	20
Suturing of wound	5
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Total	575

NOSE AND THROAT

Antrostomy	1
Biposy	2
Bronchoscopy	5
Cauterization of ulcer of nose	1
Closure of antral fistula	2
Closure of cleft lip	1
Closure of soft palate	2
Closure of tracheal fistula	1
Correction of deformity of nose	21
Curettage of antrum	1
Curetment of fistula of antrum	1
Esophagoscopy	87
Ethmoidectomy	91
Excision of pharyngeal adhesions	1
Exploration of antrum	5
Exploration of frontal	1
Extirpation of nodule from vocal cord	1
Galvanocautery to larynx	1
Gastrostomy	1
Incision of abscess of nose	4
Incision of furuncle of nose	1
Incision of peritonsillar abscess	20
Incision of retropharyngeal abscess	8

REPORT OF THE AURAL DEPARTMENT

Intranasal antrum	8
Intranasal dacryocystotomy	37
Intranasal frontal	20
Killian operation	28
Laryngoscopy	27
Lothrop operation (Frontal)	1
Moore operation	3
Opening of lateral sinus	19
Opening of sphenoid	6
Packing of nose for post-operative hemorrhage	1
Plastic on nose	7
Plastic on pharynx	1
Puncturing and irrigating of antrum	52
Radical antrum	85
Radical frontal	1
Radical operation for congenital occlusion left post nares	1
Radium treatment	2
Removal of adenoids	103
Removal of bony sequestrum following fracture of frontal sinus	1
Removal of calculus from Stemon's Duct	1
Removal of carcinoma of antrum	1
Removal of carcinoma of esophagus	7
Removal of cleft fistula	1
Removal of cyst of antrum	3
Removal of foreign body from bronchus	2
Removal of foreign body from esophagus	17
Removal of growth of tonsil	1
Removal of polypus of nose	10
Removal of slough for Vincent's Angina	1
Removal of specimen from esophagus	1
Removal of specimen from larynx	1
Removal of spur of septum	6
Removal of varix of larynx	1
Removal of tonsils	308
Removal of tonsils and adenoids	2,688
Removal of tumor of antrum	1
Removal of tumor of larynx	24
Removal of tumor of naso-pharynx	3
Removal of tumor of turbinate	1
Removal of vocal cords	1
Resetting of nose	9
Staphylorrhaphy	2
Submucous resection of septum	438
Thyrotomy	2
Tracheotomy	17

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Turbinectomy	40
Turbinotomy	32
Total	4,281

MISCELLANEOUS

Curettage of jaw	1
Drainage of face for cellulitis	1
Evacuation of pus for erysipelas	1
Evulsion of toenail	2
Excision of cyst of cheek	1
Excision of cyst of thyroglossal duct	3
Excision of fibroma of thumb	1
Exploration for foreign body spinal column	1
Extraction of teeth	38
Incision of abscess of cheek	1
Incision of abscess of chest	1
Incision of cervical abscess	7
Incision of cervical gland	6
Incision and drainage of alveolar abscess	1
Injection of salvarsan	4
Lumbar puncture	5
Plastic closure of wound in cheek	1
Plastic of face	1
Removal of bone for osteomyelitis of jaw	1
Removal of bony sequestrum of skull	4
Removal of carcinoma of tongue	5
Removal of foreign body spinal column	1
Removal of nevus of face	1
Removal of specimen for pathological examination	1
Removal of tumor of parotid gland	1
Suturing of wound of face	1
Transfusion	1
Total	92

Total operations	5,120
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REPORT OF THE AURAL DEPARTMENT

Out-Patient Operations

Amputation of uvula	1
Cauterization of middle turbinate	1
Cauterization of polyp of ear	2
Curettage of granulations	1
Curettage of polyp of ear	1
Excision of cyst of auricle	3
Incision of abscess of canal	299
Incision of abscess of lobe	3
Incision of abscess of postaural region	2
Incision of abscess of septum	2
Incision of abscess of tragus	1
Incision of bleb of ear drum	6
Incision of cervical gland	2
Incision of furuncle of auricle	1
Incision of peritonsillar abscess	1
Incision of tear sac	1
Incision of wen	7
Opening of antrum	9
Paracentesis of membrana tympani	1,196
Removal of foreign body from ear	34
Removal of foreign body from nose	5
Removal of polypi from ear	8
Removal of polypi from nose	4
Removal of synechia in region of sac	1
Removal of tab of skin from ear	1
Resetting of nose.	1
Submucous resection of septum	32
Turbinotomy	3
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Total	1,628

Table of Diseases

Compiled from Records

	HOUSE	OUT- PATIENT
SECTION I		
Specific Infectious Diseases	277	383
SECTION II		
Diseases due to Animal Parasites	4	8
SECTION III		
Diseases of Metabolism	13	3
SECTION IV		
Diseases Peculiar to Infancy	119	115
SECTION V		
Diseases Due to Physical Agents	1	11
SECTION VI		
Poisonings. Intoxications	2	8
SECTION VII		
Tumors, Benign and Malignant	257	817
SECTION VIII		
Congenital Malformations	21	21
SECTION IX		
General Injuries and Diseases of Skin and Subcutaneous Tissue	9	20
SECTION X		
Special Skin Diseases	25	335
SECTION XI		
Diseases of the Circulatory System	26	117
SECTION XII		
Diseases of the Lymphatic System	38	73
SECTION XIII		
Diseases of the Blood	5	5
SECTION XIV		
Diseases of the Ductless Glands	6	12
SECTION XV		
Diseases of the Nervous System.	84	352

TABLE OF DISEASES

	HOUSE	OUT- PATIENT
SECTION XVI		
Diseases of the Bones, Joints, Muscles, Tendons, and Fascia	57	18
SECTION XVII		
Diseases and Injuries of the Eye and Ear:		
Diseases of the Eye	2,538	30,668
A. General	261	16,578
B. Lids	107	2,158
C. Lacrimal apparatus	188	541
D. Conjunctiva	25	4,117
E. Cornea	398	3,184
F. Anterior Chamber	13	56
G. Sclera	14	82
H. Lens.	922	1,299
J. Uveal Tract	13	32
1. Iris	115	405
2. Ciliary Body	25	19
3. Choroid	14	204
K. Retina	36	203
L. Vitreous	46	283
M. Optic Nerve	19	220
N. Eyeball	157	278
O. Orbit	13	8
P. Disturbances of Motion	172	1,001
Diseases of the Ear	925	9,369
Q. General	1	34
R. Auricle	4	66
S. External Auditory Canal	53	3,010
T. Eustachian Tube	1	1,835
V. Middle Ear and Mastoid	846	4,412
W. Internal Ear	20	12
SECTION XVIII		
Diseases of the Nose and Accessory Sinuses	885	1,117
SECTION XIX		
Diseases of the Mouth, Lips, Cheeks, Pharynx, Tonsils, and Palate	3,189	2,213
SECTION XX		
Diseases of the Jaw, Teeth, and Gums	21	112
SECTION XXI		
Diseases of the Tongue		2

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

	HOUSE	OUT- PATIENT
SECTION XXII		
Diseases of the Esophagus	53	31
SECTION XXIII		
Diseases of the Stomach	1	
SECTION XXIV		
Diseases of the Intestines	2	
SECTION XXV		
Diseases of the Liver and Gall Ducts	1	
SECTION XXVIII		
Diseases of the Rectum and Anus	3	
SECTION XXIX		
Diseases of the Larynx.	13	16
SECTION XXX		
Diseases of the Trachea and Bronchi	18	5
SECTION XXXI		
Diseases of the Lungs	2	
SECTION XXXII		
Diseases of the Pleura and Mediastinum	5	
SECTION XXXIII		
Diseases of the Kidney and Ureter	7	2
SECTION XXXIV		
Diseases of the Bladder	2	1
SECTION XXXVII		
Diseases of the Female Generative Organs	1	
SECTION XXXVIII		
Puerperal State	4	
SECTION XLI		
Ill-Defined or Unclassified Diseases	53	733
	<hr/>	<hr/>
Totals	8,667	46,567

Form of a Bequest to the Infirmary

*I give and bequeath to the Massachusetts
Charitable Eye and Ear Infirmary of Boston,
the sum of dollars, to be applied to
the uses of said Infirmary.*

Ninety-eighth Annual Report
of the
Massachusetts Charitable
Eye and Ear Infirmary

Incorporated in 1827

For the Year
1923

THE MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

243 Charles Street, Corner Fruit Street, Boston, Mass.

OUT-PATIENT DEPARTMENT

The Out-Patient Department is open daily, excepting Sundays and legal holidays, from 8.30 to 10.00 A.M., for examination and treatment of all poor persons afflicted with disease of the eye or ear. Persons needing treatment in the hospital wards will be advised accordingly. Medicines and glasses are furnished at the Infirmary, but neither prescription nor advice will be sent by mail, express, or messenger.

Admission fee: Adults, fifty cents; children under sixteen years of age, fifteen cents.

HOSPITAL

Persons recommended for admission to the hospital wards should apply at the Director's Office before 1 P.M., *on week days only, excepting legal holidays.*

Accident and emergency cases admitted at any time.

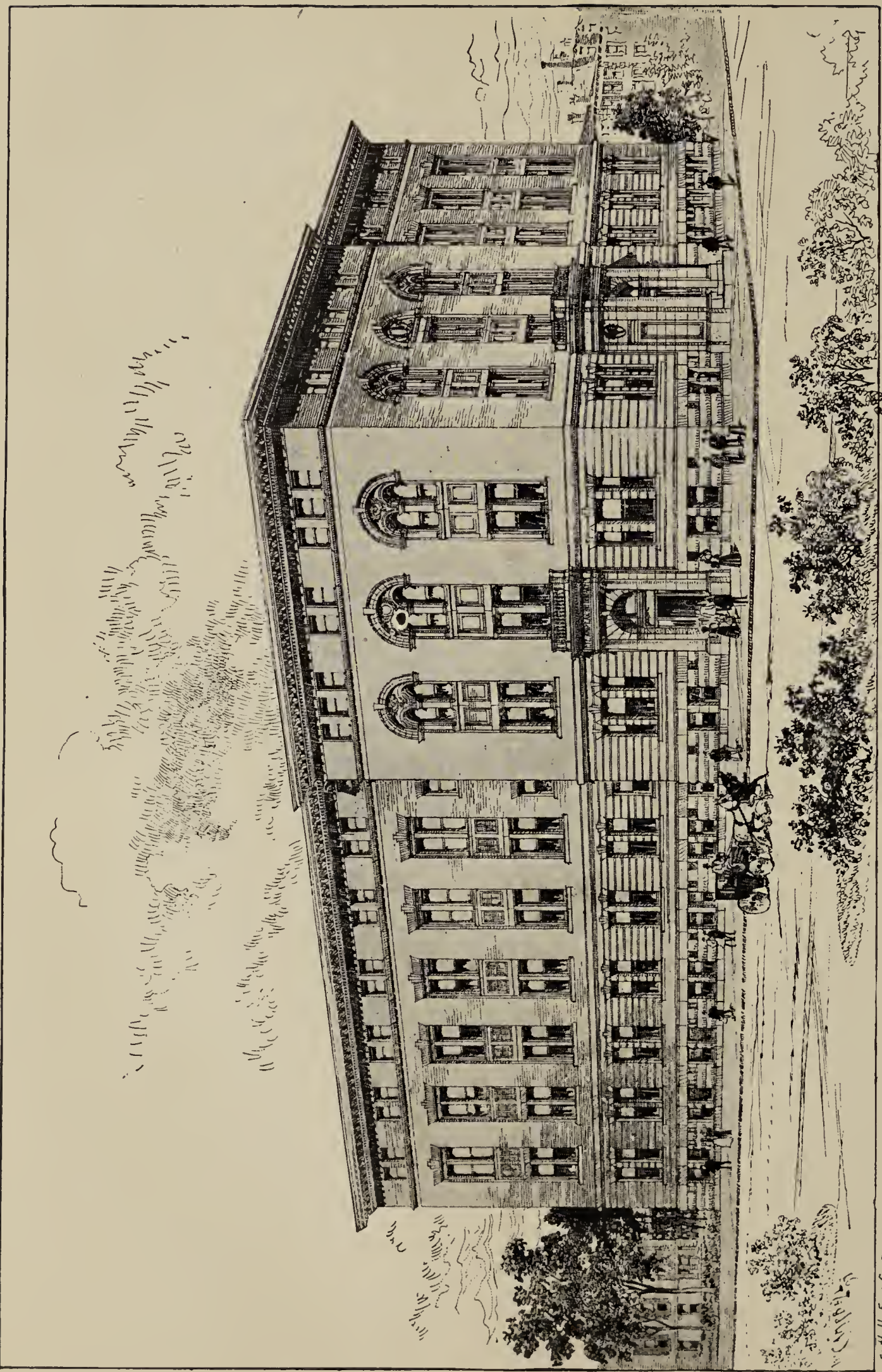
All communications about the Infirmary or any inmate must be addressed to the Director, and should contain the full name of the patient as well as the name and address of the writer.

Persons admitted to the wards as in-patients will be charged for board at the rate of twenty-one dollars per week, payable in advance, unless some special arrangement is made by the Director. No reduction in rate of board made to those residing outside the Commonwealth of Massachusetts.

Visitors will be admitted to see patients from 1 to 2 o'clock in the afternoon, and but one visitor a day is allowed to each patient over seven years of age. Children under seven years of age may be visited on Sundays and legal holidays from 1 to 2 P.M., when two visitors are permitted. Visitors may be excluded at any time.

On Sundays and holidays two visitors are allowed each patient.

The Infirmary reserves the right to investigate every case.



MAIN BUILDING, MARCH, 1899

Suffolk Eng Co Boston

Ninety-eighth Annual Report
of the
Massachusetts Charitable
Eye and Ear Infirmary

For the Year
1923

BOSTON

Officers, 1924

Board of Managers, 1923-1924

- 1887 GEORGE P. GARDNER, 40 State Street
1893 HENRY PARKMAN, 36 Temple Place
1896 WILLIAM D. SOHIER,* Room 817, 53 State Street
1903 WILLIAM C. ENDICOTT, 71 Ames Building
1903 RUSSELL G. FESSENDEN, 50 State Street
1905 HERBERT M. SEARS, 53 State Street
1907 CHARLES P. CURTIS, 71 Ames Building
1907 ROBERT H. STEVENSON, Jr., 118 Marlborough Street
1907 JOHN LAWRENCE,* 10 State Street
1914 JAMES DEAN, 19 Congress Street
1914 JAMES C. HOWE, 17 Court Street
1918 EDWARD H. BRADFORD, M.D., 220 Beacon Street
1922 ALBERT L. SCOTT, Lockwood, Greene & Co., Inc., 24 Federal Street
1922 T. JEFFERSON COOLIDGE, 17 Court Street

President

EDWARD H. BRADFORD, M.D.

Secretary

JAMES C. HOWE, 17 Court Street, Boston

Treasurer

HENRY PARKMAN, 36 Temple Place, Boston

Executive Committee

GEORGE P. GARDNER

HERBERT M. SEARS

JOHN LAWRENCE

Finance Committee

RUSSELL G. FESSENDEN

JAMES DEAN

JAMES C. HOWE

*Appointed by the Commonwealth.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Visiting Committee

January	MR. FESSENDEN	July	MR. PARKMAN
	MR. SEARS		MR. STEVENSON
February	MR. SEARS	August	MR. STEVENSON
	DR. BRADFORD		MR. COOLIDGE
March	DR. BRADFORD	September . .	MR. COOLIDGE
	MR. SCOTT		MR. CURTIS
April	MR. SCOTT	October . . .	MR. CURTIS
	MR. HOWE		MR. ENDICOTT
May	MR. HOWE	November . .	MR. ENDICOTT
	MR. DEAN		MR. GARDNER
June	MR. DEAN	December . .	MR. GARDNER
	MR. PARKMAN		MR. FESSENDEN

Ladies' Visiting Committee

MRS. RICHARD C. CURTIS, *Chairman*

MISS ELIZABETH BEAL	MRS. R. CUSHING HAMLIN
MISS HARRIET H. BRAYTON	MRS. BARTLETT HARWOOD
MRS. THOMAS P. CURTIS	MRS. ROBERT HERRICK, JR.
MRS. LOUIS CURTIS, JR.	MISS MILDRED KENNEDY
MISS ELLEN CURTIS	MISS MADELEINE LAWRENCE
MRS. SAMUEL ELIOT	MISS THERESA L. MERRIAM
MRS. WILLIAM ENDICOTT	MRS. THOMAS R. MORSE
MRS. JOHN C. FAIRCHILD	MRS. JAMES F. NORRIS
MRS. J. F. FAY	MRS. HAROLD PEABODY
MRS. WILLIAM S. FORBES	MRS. A. N. RANTOUL
MRS. REGINALD FOSTER	MISS CLARA B. WINTHROP

Executive Officers

Director

FREDERIC A. WASHBURN, M.D.

Assistant to the Director

SOPHIA B. EASTMAN, R.N.

Surgical Board

Consulting Ophthalmic Surgeons

HENRY W. BRADFORD, M.D.	FREDERICK E. CHENEY, M.D.
H. BECKLES CHANDLER, M.D.	HENRY H. HASKELL, M.D.
MYLES STANDISH, M.D.	ALEXANDER QUACKENBOSS, M.D.
EDWIN E. JACK, M.D.	WALTER B. LANCASTER, M.D.

OFFICERS, 1924

Consulting Aural Surgeons

EDWARD M. PLUMMER, M.D. FREDERICK L. JACK, M.D.
WILLIAM F. KNOWLES, M.D.

Ophthalmic Chiefs of Service

FRED M. SPALDING, M.D. GEORGE S. DERBY, M.D.

Aural Chiefs of Service

EUGENE A. CROCKETT, M.D. PHILIP HAMMOND, M.D.

Laryngological Chief of Service

HARRIS P. MOSHER, M.D.

Ophthalmic Surgeons

FREDERICK H. VERHOEFF, M.D. SAMUEL J. McDONALD, M.D.
PETER H. THOMPSON, M.D. W. HOLBROOK LOWELL, M.D.

Aural Surgeons

D. HAROLD WALKER, M.D. FRANCIS P. EMERSON, M.D.
HARRIS P. MOSHER, M.D. LEON E. WHITE, M.D.

Laryngologists

D. CROSBY GREENE, JR., M.D. HARRY A. BARNES, M.D.

Assistant Ophthalmic Surgeons

EDWARD K. ELLIS, M.D. CLARENCE F. WORTHEN, M.D.
WILLIAM N. SOUTER, M.D. EDWIN B. GOODALL, M.D.
RALPH A. HATCH, M.D. JOHN G. JENNINGS, M.D.
HENRY HAWKINS, M.D. ROLAND C. MACKENZIE, M.D.
HUGO B. C. RIEMER, M.D. HENRY G. CARROLL, M.D.

Assistant Aural Surgeons

GEORGE L. TOBEY, JR., M.D. OLIVER A. LOTHROP, M.D.
CALVIN B. FAUNCE, JR., M.D. WILLIAM J. HARKINS, M.D.
FREDERICK L. BOGAN, M.D. GEORGE H. POIRIER, M.D.
DANA W. DRURY, M.D. CHARLES T. PORTER, M.D.
JOHN H. BLODGETT, M.D. FRED A. SIMMONS, M.D.
D. CAMPBELL SMYTH, M.D. HAROLD G. TOBEY, M.D.
HARRY P. CAHILL, M.D. WILLIAM I. WIGGIN, M.D.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

Associate Laryngologists

FREDERICK E. GARLAND, M.D.	CALVIN B. FAUNCE, M.D.
D. CAMPBELL SMYTH, M.D.	WILLIAM J. HARKINS, M.D.
WILLIAM I. WIGGIN, M.D.	

Ophthalmic Clinical Assistants

BARRY H. BURGESS, M.D.	PERCY C. PROCTOR, M.D.
MAUD CARVIL, M.D.	RALPH H. RUGGLES, M.D.
HAROLD B. CHANDLER, M.D.	FRED S. THORNE, M.D.
ROBERT C. CHENEY, M.D.	SAMUEL H. WILKINS, M.D.

Aural Clinical Assistants

CHARLES O. DAY, M.D.	PHILIP E. MELTZER, M.D.
HARRY P. FINCK, M.D.	EDWIN A. MESERVE, M.D.
JAMES C. KIRBY, M.D.	JOSEPH M. SCANLON, M.D.
CHARLES D. KNOWLTON, M.D.	LEROY A. SCHALL, M.D.
LEON E. WHITE, Jr., M.D.	

Assistant Laryngologists

HARRY P. FINCK, M.D.	GEORGE H. POIRIER, M.D.
EDWARDS W. HERMAN, M.D.	CHARLES T. PORTER, M.D.
V. H. KAZANJIAN, M.D.	FRED A. SIMMONS, M.D.
JAMES C. KIRBY, M.D.	HAROLD G. TOBEY, M.D.

Dentist

GEORGE H. WRIGHT, D.M.D.

Pathologist

FREDERICK H. VERHOEFF, M.D.

Roentgenologist

A. S. MACMILLAN, M.D.

Consulting Physicians

C. MORTON SMITH, M.D.	JOSEPH C. AUB, M.D.
FREDERICK T. LORD, M.D.	THEODORE J. EASTMAN, M.D.
JAMES H. MEANS, M.D.	HARRY LINENTHAL, M.D.
GEORGE R. MINOT, M.D.	WILLIAM B. ROBBINS, M.D.
GERALD BLAKE, M.D.	F. GORHAM BRIGHAM, M.D.
PAUL D. WHITE, M.D.	

OFFICERS, 1924

Physician to Children

FRITZ B. TALBOT, M.D.

Assistants in the Care of Children

J. HERBERT YOUNG, M.D.

WILLIAM R. P. EMERSON, M.D.

RICHARD S. EUSTIS, M.D.

WARREN R. SISSON, M.D.

Consulting Surgeons

SAMUEL J. MIXTER, M.D.

DANIEL F. JONES, M.D.

CHARLES A. PORTER, M.D.

HUGH WILLIAMS, M.D.

FRANKLIN G. BALCH, M.D.

LINCOLN DAVIS, M.D.

EDWARD P. RICHARDSON, M.D.

W. JASON MIXTER, M.D.

GEORGE W. W. BREWSTER, M.D.

WYMAN WHITTEMORE, M.D.

ROBERT B. GREENOUGH, M.D.

RICHARD H. MILLER, M.D.

Consulting Orthopedic Surgeons

ZABDIEL B. ADAMS, M.D.

NATHANIEL ALLISON, M.D.

Consulting Genito-Urinary Surgeon

J. DELLINGER BARNEY, M.D.

Consulting Neurologists

EDWARD W. TAYLOR, M.D.

JAMES B. AYER, M.D.

GEORGE CLYMER, M.D.

Consulting Dermatologists

CHARLES J. WHITE, M.D.

HARVEY P. TOWLE, M.D.

Consulting Pathologists

J. HOMER WRIGHT, M.D.

OSCAR RICHARDSON, M.D.

Consulting Anesthetists

FREEMAN ALLEN, M.D.

ARTHUR M. DODGE, M.D.

Refractionists

EDWIN B. GOODALL, M.D.

ALFRED C. TRULL, M.D.

RALPH H. RUGGLES, M.D.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

House Staff

Ophthalmic Internes

J. HERBERT WAITE, M.D.

C. EDMUND MCGUIGAN, M.D.

WILLIAM H. EVANS, M.D.

DERRICK T. VAIL, M.D.

A. MILTON GOLDMAN, M.D.

Aural and Laryngological Internes

LEON E. WHITE, JR., M.D.

KENNETH M. DAY, M.D.

LYMAN G. RICHARDS, M.D.

LEON E. BRAWNER, M.D.

EDMUND A. LODGE, M.D.

FRED E. MOTLEY, M.D.

Superintendent of Nurses

SALLY JOHNSON, R.N.

Chief Social Worker

JESSIE M. C. HUME, R.N.

Report of the Board of Managers

The Massachusetts Charitable Eye and Ear Infirmary has completed a successful year, and has continued to render a great service to needy persons who otherwise would probably have been unable to secure proper treatment and relief.

In the public wards the total number of days' board supplied was 46,911, the rate of pay ranging from nothing to \$21 a week. The gross receipts were equivalent to supplying 27,030 free days' board and the balance at full rates. Comparative figures for 1922 were 45,117 total number of days' board and 25,792 free. In 1919 they were 37,372 and 21,649. These figures indicate the increased efficiency of the institution and clearly demonstrate the admirable work which is being done in caring for the poor. In addition to the above, the total number of visits in the Out-Patient Department was 68,910, which compares with 69,154 in 1922 and 67,261 in 1921.

During the past year several extraordinary improvements have been completed, which include a new kitchen with complete new equipment, a new storeroom for supplies under the kitchen, a rewiring of the entire hospital, and a new operating and etherizing room with new equipment on the private floor.

Notwithstanding these extraordinary expenditures, the year closed without a deficit, which the Managers regard as striking evidence of the able management and economy of the Director, Dr. Frederic A. Washburn, and his staff. It is obvious that this result could not have been achieved through revenues received from operations only, but was made possible through subscriptions, income from investments, together with profit from the private ward, and the Optical Department, which provides patients with spectacles and eyeglasses. In this connection it is interesting to note that the Infirmary has a very completely equipped Optical Department for the sale of rims and glasses at a low cost to its own patients.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

The Medical Social Service Department is an important factor in the organization of the Infirmary and in main follows up all cases referred from clinical wards for the purpose of completing medical treatment. During the past year 1,148 new patients were referred to this department for various types of service. In addition to this, a large group of patients received service of which no record was kept, and more than 300 were referred to public health nurses for medical supervision in their respective districts. The value of such supervision is most important. It has undoubtedly expedited the recovery of patients.

An important development of the past year has been the arrangement whereby Dr. Harris P. Mosher, the Chief of the Laryngological Service and Professor of Laryngology at Harvard Medical School, who has been since 1906 one of the aural surgeons of the Infirmary, will devote nearly his whole time to the Infirmary for the care of patients, the advancement of the science of laryngology, and research and teaching. Dr. Mosher's research work will add greatly to the efficiency and prestige of the Infirmary.

The Managers have accepted with regret the resignation of Dr. Quackenboss after many years of devoted and arduous service in the Ophthalmic Department, of which for the last ten years he was Chief. They desire to take the opportunity to record their gratitude for his skill and untiring zeal in the work of the department and in the cause of education in the science of ophthalmology.

The Managers regret the resignation of Miss Mary Coonahan, who was Superintendent of Nurses, and in that capacity gave to the Infirmary twenty-seven years of loyal and faithful service. They wish her many years of health and happiness. Miss Sally Johnson, Superintendent of Nurses at the Massachusetts General Hospital, has been appointed Superintendent of Nurses at the Infirmary, and Miss Helen Potter, who is her first assistant, will give her whole time to the work there.

There are still many improvements which the Board of Managers would be glad to see completed but which must be deferred until the Infirmary is in a position to make the expenditure. Chief among these are a building which shall connect the Infirmary and the Out-Patient Department of the Massachusetts General Hospital,

REPORT OF THE BOARD OF MANAGERS

and a renovation of the heating system from indirect to direct steam. Such important additions to the plant can be accomplished only by support from the public, and it is hoped that such support will be forthcoming in increased amounts. In this connection, the Managers acknowledge with appreciation the many donations received during the past year.

They also wish gratefully to acknowledge the loyalty and efficiency of the surgical and medical staffs, of the heads of departments, and of all others connected with the Infirmary, whose faithful service is a most important factor in the efficiency of the organization.

R. G. FESSENDEN, *Chairman*,
ALBERT L. SCOTT,
JAMES DEAN,

Committee of the Board of Managers.

Report of the Treasurer

Statement of Income — Receipts and Disbursements

For the year ending September 30, 1923

Hospital Receipts as per Director's Report \$246,657.17

LESS:

Hospital Disbursements as per Director's Report:

General Expenses \$246,579.12

Social Service 13,055.54

\$259,634.66

Treasurer's Expenses:

Insurance \$845.48

Auditors and Bookkeeping 700.00

Legal Expense 50.00

Miscellaneous Expenses 63.75

\$1,659.23

Extraordinary Expenses:

Kitchen Renovation \$21,168.46

Rewiring Hospital 2,938.50

New Eye Operating Room 1,682.25

Installation of New Sinks 1,523.93

Improvements to Nurses' Home 1,301.00

Fireproofing Doors 839.60

Fireproofing Stairways 410.00

Miscellaneous 7.00 \$29,870.74

Total \$291,164.63

Excess of Operating Expenditures over Hospital Receipts . . . \$44,507.46

LESS:

Income from Investments \$28,870.98

Interest on Deposits 198.31

Annuity from Brigham Estate 1,000.00

Annuity from Ashton Estate 2,700.00

Contribution of Committee of Per-
manent Charity Fund, Inc. 2,500.00

Income from Aural Surgeon's Fund
expended 176.23

Gifts for General Purposes 6,997.87

\$42,443.39

REPORT OF THE TREASURER

Income from Brooks Fund for Social Service	\$250.00		
Income from Sears Fund for Social Service	665.89		
Contribution of the Permanent Charity Fund, Inc. for Social Service.	750.00		
		<hr/>	\$1,665.89
Transfers from Income Funds for Special Purposes:			
Glasses Fund	\$55.95		
Permanent Charity Relief Fund, Inc.	216.57		
Pre-Tubercular Eye Worker Fund	1,106.00		
Piano Fund	385.00		
Toward Salary and Expenses of Social Service Worker	615.08		
Convalescent Care of Children	100.00		
M. Douglass Flattery Fund	18.41	\$2,497.01	\$46,606.29
		<hr/>	
EXCESS OF INCOME RECEIPTS OVER DISBURSEMENTS FOR THE YEAR,			<u>\$2,098.83</u>

SOCIAL SERVICE WORK

RECEIPTS:

Income from Brooks Fund	\$250.00	
Income from Sears Fund	665.89	
Committee of the Permanent Charity Fund, Inc.	750.00	
Contributions to Social Service Fund	199.73	
	<hr/>	\$1,865.62

DISBURSEMENTS:

Salaries of Social Service Workers	\$9,844.87	
Special Social Service Workers	1,841.25	
Stationery	185.20	
Postage, Telephone, Sundries	933.78	
Car Fares	250.44	
	<hr/>	\$13,055.54

HENRY PARKMAN,
Treasurer.

PATTERSON, TEELE AND DENNIS,
Accountants and Auditors.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

INVESTMENT SECURITIES

September 30, 1923

	Rate of Interest	Due Date	Par Value	Book Value
RAILROAD BONDS	%			
Atchison, Topeka & Santa Fe Rail- way Co. General Mortgage	4	1995	\$7,500.00	\$8,785.78
Atchison, Topeka & Santa Fe Rail- way Co. Adjustment	4	1995	4,000.00	
Atchison, Topeka & Santa Fe Rail- way Co. Convertible	4	1955	1,000.00	1,000.00
Boston & Albany R.R. Co., Improve- ment	4	1933	10,000.00	9,925.00
Chicago Junction Railways and Union Stock Yards Co., Mortgage	4	1940	25,000.00	24,900.00
Chesapeake & Ohio Railway Co., Gen- eral Mortgage	4½	1992	10,000.00	10,400.00
Chicago City Railway, First Mortgage	5	1927	10,000.00	10,500.00
Fitchburg Railroad Company	4	1927	10,000.00	10,675.00
Kansas City, Clinton & Springfield Railway Company	5	1925	5,000.00	4,502.50
Kansas City, Memphis & Birmingham R.R. Co., General Mortgage	4	1934	4,500.00	9,095.00
Kansas City, Memphis & Birmingham R.R. Co., Income	5	1934	9,000.00	
Kansas City and Memphis Railway and Bridge Company, First Mortgage	5	1929	10,000.00	10,008.50
Long Island R.R. Company, Unified Gold Mortgage	4	1949	25,000.00	24,012.50
Michigan Central R.R. Company	3½	1952	10,000.00	8,100.00
New York Central & Hudson River R.R., Michigan Central Collateral	3½	1998	15,000.00	13,776.70
Northern Pacific Railway Company	3	2047	15,000.00	9,960.00
Northern Pacific Railway Company	5	2047	10,000.00	9,600.00
Oregon Short Line R.R. Company, Refunding	4	1929	10,000.00	9,450.00
St. Johnsbury & Lake Champlain R.R. Company	5	1944	10,000.00	10,000.00
				<u>\$184,690.98</u>

REPORT OF THE TREASURER

MISCELLANEOUS BONDS:	Rate of Interest %	Due Date	Par Value	Book Value
American Agricultural Chemical Co. . .	5	1928	\$5,000.00	\$4,712.50
American Agricultural Chemical Co., First Refunding Mortgage	7½	1940	5,000.00	4,875.00
American Tel. & Tel. Co., Collateral Trust	4	1929	10,000.00	9,176.92
American Tel. & Tel. Co., Collateral Trust	5	1946	5,000.00	4,934.37
Appalachian Power Company	5	1941	10,000.00	9,100.00
Brown Company	6	1942	10,000.00	9,900.00
Butte Electric & Power Co.	5	1951	8,000.00	8,000.00
California Gas & Electric Corp.	5	1937	10,000.00	9,550.00
Commonwealth of Massachusetts, Reg.	3	1928	5,000.00	5,100.00
Detroit Edison Company, First Mtg.	5	1933	15,000.00	14,700.00
General Electric Company, Gold Deb.	5	1952	10,000.00	8,673.75
Georgia Railway & Electric Co.	5	1949	10,000.00	9,850.00
Kansas City Power & Light Co.	5	1952	10,000.00	9,170.00
Kingdom of Belgium	7½	1935	4,000.00	3,970.00
Kingdom of the Netherlands, Ser. A. .	6	1972	25,000.00 } Guilders }	9,700.00
Laurentide Power Company	5	1946	10,000.00	9,650.00
Louisville & Jeffersonville Bridge Company	4	1945	7,000.00	6,965.00
Manchester Traction, Light & Power Co.	5	1952	10,000.00	9,375.00
Mass. Hospital Life Insurance Co. (Annuity in Trust)	5		6,700.00	6,700.00
E. Massachusetts Street Railway Co., Adjustment Trust, 3-year notes . .	6	1922	5,000.00 } }	4,900.00
E. Massachusetts Street Railway Co., Adjustment Trust, 3-year Notes . .	6	1922	250.00 }	
Memphis Power & Light Company . .	5	1948	10,000.00	8,900.00
Mississippi River Power Company, First Mortgage	5	1951	10,000.00	7,787.50
National Tube Company	5	1952	5,000.00	5,055.00
N. E. Power Company, First Mtge. . .	5	1951	10,000.00	8,550.00
N. E. Tel. & Tel. Co.	5	1932	15,000.00	15,000.00
Philadelphia Rapid Transit Co.	5½	1932	10,000.00	10,011.70
Savannah Electric Co., First Consoli- dated Mortgage	5	1952	3,000.00	3,000.00
Seattle Electric Company, First Mtge.	5	1930	10,000.00	10,600.00
Southern Bell Tel. & Tel. Co., Sinking Fund	5	1941	5,000.00	5,037.50

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

	Rate of Interest %	Due Date	Par Value	Book Value
Southern California Edison Co., General				
Mortgage	5	1939	\$10,000.00	\$9,800.00
The Steel & Tube Co. of America,				
Series B	6	1944	10,000.00	9,450.00
Swift & Company, First Mortgage . .	5	1944	5,000.00	4,993.75
Tacoma Railway & Power Co., First				
Mortgage	5	1929	10,000.00	10,150.00
United States Rubber Company . . .	5	1947	10,000.00	8,437.50
United States Steel Corp., Sinking Fund	5	1963	15,000.00	14,693.75
United States Steel Corporation, Sink-				
ing Fund	5	1963	10,000.00	10,352.50
United Electric Securities Co., Col-				
lateral Trust Sinking Fund (37th				
Series)	5	1942	5,000.00	4,975.00
				<u>\$305,796.74</u>
U.S. Certificate of Indebtedness . . .	5¾	1924	10,000.00	<u>\$10,000.00</u>

RAILROAD STOCKS	Number of Shares	Book Value
Chicago Junction Railways & Union Stockyards Company,		
Preferred	100	\$11,907.50
Chicago & Northwestern R.R. Company, Common . .	62	7,981.25
Manhattan Railway Company	100	14,187.50
N.Y.C. & Hudson River R.R. Co.	50	5,881.25
Union Pacific R.R. Company, Preferred	100	8,156.25
		<u>\$48,113.75</u>

REAL ESTATE STOCKS

Boston Real Estate Trust	10	\$10,260.75
Boston Ground Rent Trust	15	1,500.00
Providence Building Company (Bannigan)	5	500.00
Warren Chambers Trust	5	500.00
		<u>\$12,760.75</u>

REPORT OF THE TREASURER

MISCELLANEOUS STOCKS

American Telephone & Telegraph Company	200	\$24,218.26
American Sugar Refining Company, Preferred	100	11,680.75
Ballardvale Mills Company, Preferred	250	25,000.00
Boston Elevated Railway Company, Second Preferred	50	7,518.70
Electric Bond & Share Company, Preferred	100	9,726.25
Standard Oil Company of New Jersey, Preferred	50	5,700.00
United States Steel Corporation, Preferred	100	10,925.00
		<hr/>
		\$94,768.96
		<hr/>

UNCLASSIFIED STOCKS AND BONDS

	Par Value	
Eastern Mass. Street Railway Company, Refunding Mortgage, 5s, of 1948	\$550.00	} \$5,566.14
Eastern Mass. Street Railway Company, Refunding Mortgage, 5s, of 1948, Fractional Certificate	30.00	
Eastern Mass. Street Railway Company, Adjustment Stock	100.00	
Eastern Mass. Street Railway Company, Adjustment Stock, Fractional Certificates	16.00	
Eastern Mass. Street Railway Company, Common Stock	1,500.00	
		<hr/>
		\$5,566.14
		<hr/>

SUMMARY

	Book Value
Bonds, Railroad	\$184,690.98
Bonds, Miscellaneous	305,796.74
U. S. Certificate of Indebtedness	10,000.00
Stocks, Railroad	48,113.75
Stocks, Real Estate	12,760.75
Stocks, Miscellaneous	94,768.96
Unclassified Stocks and Bonds, etc.	5,566.14
	<hr/>
Total Investment Securities	\$661,697.32
	<hr/>

HENRY PARKMAN,
Treasurer.

PATTERSON, TEELE AND DENNIS,
Accountants and Auditors.

Report of the Director

TO THE BOARD OF MANAGERS:

Gentlemen: I have the honor to submit my report for the year ending September 30, 1923.

The following table shows the pay and free days of patients admitted to the hospital, exclusive of the private ward, for the last five years:

1919		1920	
*Free	Full Rate	*Free	Full Rate
21,649	15,723	20,920	19,671
(37,372)		(40,591)	
1921		1922	
*Free	Full Rate	*Free	Full Rate
29,459	16,963	25,792	19,325
(46,422)		(45,117)	
1923			
	*Free	Full Rate	
	27,030	19,881	
	(46,911)		

We have made the following extraordinary improvements in the plant during the year:

1. New kitchen and complete new equipment.
2. New storeroom under the kitchen.
3. Ice-cream room with new equipment.
4. Seven hand sinks: five in the corridors, one in the tonsil ward and one in the dressing room off nursery.
5. Rewiring entire hospital from 210 to 110 voltage.
6. Fireproofing of certain doors. Wooden treads replaced by blue-stone on one stairway.

*These figures are obtained by taking the amount of money received for board of patients in public wards, and dividing that figure by the full rate of board prevalent at the time. This gives the number of days of paying patients, reckoned as though they were paying full rates. By subtracting this figure from the total of patients' days we get the number of free days.

REPORT OF THE DIRECTOR

7. Remodeling of room on the private floor for office of Chief of Laryngological service.
8. New operating room, etherizing room and recovery room on the private floor with new equipment.

The changes in the kitchen were radical and expensive, but necessary to meet the demands of the much increased service.

The soil beneath the former kitchen floor was removed, a new floor placed in the kitchen, and a storeroom built beneath it.

This sub-basement under the kitchen has made it possible for us to put all the kitchen apparatus which requires piping on pedestals which enclose the piping. These pedestals are placed upon cement bases so that the difficulties of cleaning in the kitchen are reduced to a minimum. Practically no pipes are in sight and none come up directly through the floor. The floor is of red tile and the walls of white tile. This transformation from the old and dingy kitchen to a modern room which is light and easily cleaned with new equipment throughout is very striking. It all makes for better service, higher standards and better morale. The modern equipment includes a dish-washing machine, a mixing machine and other time and labor-saving pieces of apparatus. A cafeteria for the men and women employees was also built in connection with this kitchen.

The installation of the hand sinks about the hospital will be of very great benefit, as we believe it will lessen the chances of contagion being carried from one patient to another.

The chief physical needs remaining are:

1. A connecting building between the Infirmary and the Out-Patient Building of the Massachusetts General Hospital.
2. Changing the heating system from indirect steam heating to direct heating.
3. Oil-burning equipment for heating the nurses' home.
4. New laundry equipment.
5. Cafeteria for the nurses.
6. Additional X-Ray machine.

The following extract from the Director's report of last year is true now as it was then:

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

“The connecting building mentioned above in Item 1 is sorely needed to give the Infirmary its maximum efficiency. A few of these reasons follow:

“A. The easiest and freest means of communication between the two hospitals for the patients, physicians, nurses and others should be furnished. Eye, ear and throat diseases are frequently symptoms of a general disease. Easy examination by and consultation with other departments is essential for the best interest of the patient. Our Throat Department now has its beds in the Infirmary and its Out-Patient Department at the Massachusetts General Hospital. There should be a combination of the Out-Patient Departments of the two institutions, with a central admission room in the new building.

“B. The Infirmary’s service would be much improved if it had the major part of its first floor, now occupied by its Out-Patient Department, for other purposes. The administrative offices should be there, and not on the second floor, as they are now. The Infirmary will in time doubtless have on its staff paid nearly full-time physicians, men who will devote much time to teaching and research. Offices and laboratories for such men may be installed in this space. We need an emergency ward.

“Briefly stated, these are the reasons for the desired building. The Infirmary’s share, if it paid a half of the cost, would probably be nearly \$200,000. I hope the Managers will give this need their best thought and make plans to obtain the requisite money.”

During the year we have lost the services of Miss Mary Coonahan, who for twenty-seven years has been the Superintendent of Nurses at the Infirmary. Her service was long and faithful, and she always had the interests of the Infirmary at heart. It is the hope of all of us, that, freed from the burden and detail of responsibility of hospital work, she may have many years of comfort and happiness. Miss Sally Johnson, Superintendent of Nurses at the Massachusetts General Hospital, has been appointed Superintendent of Nurses at the Infirmary. She took over her new

REPORT OF THE DIRECTOR

duties in June. Miss Johnson's ability and success in her profession are so well known that it is needless to say that the Infirmary is most fortunate in securing her services. Miss Helen Potter is her first assistant; her whole time will be given to the Infirmary. Miss Potter has also proved herself a successful administrator and educator. I regard the outlook for a high standard in our nursing service as most promising. Miss Johnson's report calls attention to the unusually good opportunities presented at the Infirmary for instruction of nurses who desire to do Public Health Work. I would invite attention to her report. The opportunities at the Infirmary are not utilized for this purpose nearly to the extent they should be.

After long discussion and careful thought, the Infirmary has made a new venture in the organization of its staff. Dr. Harris P. Mosher, the Chief of the Laryngological Service and Professor of Laryngology at Harvard Medical School, has been put, by these two institutions, on a nearly full-time basis. He was appointed under the same conditions as the Chiefs of the Medical and Surgical Services at the Massachusetts General Hospital. He is paid a salary by the Infirmary and by the School. His first duties are: the care of patients, the advancement of the science of Laryngology, research and teaching. After his full duty to the Infirmary and School is done, he has the privilege of seeing a few private patients in his office at the Infirmary and having patients in the private ward.

The Infirmary and School are peculiarly fortunate in having a man of Dr. Mosher's world-wide reputation to start this plan, which we believe and hope will result in a great increase of usefulness and prestige for the Infirmary.

Attention is invited to appended reports and tables of statistics.

Respectfully submitted,

FREDERIC A. WASHBURN, M.D.,

Director.

Director's Financial Statement

From October 1, 1922, to October 1, 1923

OPERATING EXPENSES		1923	1922
SALARIES AND WAGES			
Officers and Clerks		\$15,202.55	\$12,328.64
Telephone Operators		2,682.15	2,822.57
Out-Patient Department Clerks		8,123.51	6,649.98
Social Service Department		11,686.12	10,057.41
Druggists		3,091.50	2,920.55
Opticians		4,742.49	4,484.09
Refractionists		1,327.49	1,327.02
Superintendent of Nurses and Assistants		1,980.00	2,430.64
Head Nurses and Assistants		27,986.00	21,571.62
Post Graduate Nurses		102.39	184.14
Pupil Nurses		946.84	828.32
Attendant Nurses		5,031.23	6,243.13
Orderlies		7,556.08	6,703.19
Ward Maids		2,374.11	2,738.12
X-Ray Department		2,639.45	1,947.35
Pathological Laboratory		2,068.95	1,926.00
Store		1,500.00	1,500.00
Housekeeping and Kitchen		23,380.19	19,200.89
Laundry		5,544.35	6,144.87
Maintenance, Property, and Plant		10,388.19	9,217.22
Special Nurses		\$138,353.59	\$121,225.75
		15,179.50	13,821.50
TOTAL		\$153,533.09	\$135,047.25
HOSPITAL RECEIPTS			
Board of Ward Patients		\$59,644.70	\$57,976.38
Operating Room Fees		4,234.50	4,811.00
X-Rays		5,426.15	2,883.10
Wassermann Tests		257.95	237.60
Refractions		2,512.65	44,857.59
Optical		49,096.37	310.47
War Tax on Glasses		14,114.45	12,602.49
Apothecary		24,302.50	24,238.75
Admission Fees, Out-Patient Department		7,373.00	8,336.40
Throat Patients' Board, Operating Room		513.01	626.31
Telephone, Interest, Stamps		221.31	169.17
Grease, Bones, Boxes, Barrels and Junk		611.56	353.75
Records and Certificates		1,149.57	1,410.41
Miscellaneous		44,466.20	42,252.50
Board, Private Patients		14,948.00	13,015.50
Operating Room Fees, Private Patients		1,096.00	810.00
X-Rays, Private Patients		33.00	54.00
Wassermann Tests, Private Patients		27.00	95.30
Miscellaneous, Private Patients			
Special Nurses, Ward		\$230,027.92	\$215,040.72
Special Nurses, Private		1,420.00	1,779.50
		15,209.25	14,920.00
TOTAL		\$246,657.17	\$231,740.22

REPORT OF THE DIRECTOR

OPERATING EXPENSES		1923	1922
SUPPLIES			
General Administration	\$7,120.48	\$6,972.94	
Apparatus and Instruments	1,061.93	1,849.92	
Medical and Surgical	11,189.34	13,744.57	
Wassermann Tests	267.00	193.00	
X-Rays	1,395.93	1,413.50	
Optical	12,857.79	12,377.37	
War Tax on Glasses		440.81	
Housekeeping and Kitchen	4,827.19	8,640.58	
Laundry	310.11	519.51	
Meat, Poultry, and Fish	11,414.73	11,274.16	
Fruit and Vegetables	3,662.84	3,520.18	
Bread and Flour	1,599.23	1,345.51	
Milk and Cream	8,145.40	7,896.93	
Groceries	8,119.47	6,638.82	
Butter and Eggs	5,935.19	4,854.27	
Gas	1,697.41	677.13	
Electric Lighting, Nurses' Home	594.43	606.62	
Heat, Light and Power, Hos-			
pital Buildings	13,452.55	14,147.18	
Ice		326.20	
Fuel, Kitchen		748.52	
Fuel, Nurses' Home	2,314.59	2,075.61	
Water, Hospital Buildings	1,408.44	1,445.40	
Water, Nurses' Home	608.52	502.92	
Maintenance, Property and			
Plant	4,991.23	4,495.32	
Refunds	1,383.46	1,932.03	
Miscellaneous	1,744.31	1,077.04	
TOTAL	\$106,101.57	\$109,716.04	

SUMMARY, 12 MONTHS		1923	1922
Salaries and Wages		\$153,533.09	\$135,047.25
Supplies		106,101.57	109,716.04
Total Maintenance Expenses		\$259,634.66	\$244,763.29
Extraordinary Expenses		29,870.74	26,321.03
Total Hospital Expenses		\$289,505.40	\$271,084.32
Total Hospital Receipts		246,657.17	231,740.22
Excess of Expenses over Receipts		\$42,848.23	\$39,344.10

Report of the Work of the Gardner Building

During the past year 214 patients were treated in the Gardner Building. Of these 26 were treated for gonorrheal ophthalmia neonatorum, and 38 for non-gonorrheal ophthalmia neonatorum. At the time of entrance the cornea was involved in three cases of gonorrheal ophthalmia neonatorum, one being clear on discharge. At the time of entrance the cornea was involved in four cases of non-gonorrheal ophthalmia neonatorum, none of these being clear on discharge. The cornea was involved in one case of ophthalmia neonatorum after admission.

There were 10 patients treated for gonorrheal suppurative conjunctivitis, and 21 for non-gonorrheal suppurative conjunctivitis. At the time of entrance, the cornea was involved in two cases of gonorrheal suppurative conjunctivitis, none of these being clear on discharge. At the time of entrance, the cornea was involved in one case of non-gonorrheal suppurative conjunctivitis which was clear on discharge. The cornea was involved in one case of gonorrheal conjunctivitis after admission.

There were also 42 patients treated for trachoma and one for anthrax.

Twenty-six patients were transferred to Gardner Building for erysipelas, impetigo and other infectious diseases which manifested themselves in the general wards of the hospital. Of the remaining 50, 42 were admitted for specific and infectious diseases and 8 with a question of infectious diseases.

Report of the Director

Statistics

HOUSE PATIENTS

Number of patients treated in ophthalmic wards	1,658
Number of patients treated in aural wards	644
Number of patients treated in nose and throat wards	2,314
Number of patients treated in private wards:	
Ophthalmic 451	} 1,760
Aural 293	
Nose and Throat, 1,016	
	<hr/> 6,376
Average number of patients treated daily in the public wards .	128+
Average number of patients treated daily in the private wards	29+
Average number of days patients remained in the hospital . .	9+
*Number of days board furnished free	27,030
*Number of days board paid at full rate in public wards . . .	19,881
Number of days board paid in private wards	10,908
	<hr/> 57,819
Cost per patient public and private wards per week	\$29.00
Cost per patient public and private wards per day	4.14+
Cost of subsistence per inmate per day . . . . .	.43+
Number admitted free	316
Number admitted at less than \$10.50 per week	567
Number admitted at \$10.50 per week	508
Number admitted at \$15.00 per week	74
Number admitted at \$17.50 per week	7
Number admitted at \$21.00 per week	3,144

PRIVATE PATIENTS

Number admitted at \$28.00 per week	1,147
Number admitted at \$35.00 per week	12
Number admitted at \$42.00 per week	2
Number admitted at \$49.00 per week	549
Number admitted at \$56.00 per week	46
Number admitted at \$63.00 per week	4
	<hr/> 6,376

*These figures are obtained by taking the amount of money received for board of patients in public wards, and dividing that figure by the full rate of board prevalent at that time. This gives the number of days of paying patients, reckoned as though they were paying full rates. By subtracting this figure from the total of patients' days we get the number of free days.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

CONDITION OF PUBLIC WARD PATIENTS ON DISCHARGE

Relieved	4,330
Not relieved	75
Died	48
Otherwise discharged	86
Remaining in hospital September 30, 1923	77
	<hr/>
	4,616

Out-Patient Department

New patients treated:

Ophthalmic	16,139
Aural	8,784
	<hr/>
Total	24,923

Old patients treated:

Ophthalmic	28,484
Aural	15,503
	<hr/>
Total	43,987

Total visits in Out-Patient Department	68,910
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Report of the Post-Graduate School for Nurses

October 1, 1922 — October 1, 1923

The school is in its thirtieth year and when, on June 1, 1923, Miss Mary Coonahan resigned, she had been its superintendent for twenty-seven of these years. No other woman in the country has as much knowledge of the nursing care of patients suffering with diseases of the Eye, Ear, Nose and Throat as Miss Coonahan has acquired during her connection with this hospital. Not only does she possess this knowledge but she has the power of imparting it to others. Successors to Miss Coonahan may come and go, but none will probably ever possess the qualifications which she has for teaching at the Infirmary. The loss of such a teacher is far-reaching indeed.

But some one must take up the work which another lays down, and the Infirmary has been fortunate in procuring Miss Helen Potter as the superintendent's assistant who has the immediate charge of the school and of the nursing. Miss Potter has had several years' experience in the private duty and executive fields. Again the institution was particularly fortunate in obtaining Miss Geneva Leach as instructor, as she had assisted one of the most able teachers in the country and had added to this a year's experience in teaching.

The summer has been a trying one for these young women, as they assumed their responsibility at the beginning of the vacation season when the nurses at the Infirmary had to be relieved for their vacations and when relief was almost impossible to obtain. The manifold evidences of patience with us, faith in us, and co-operation with us on the part of the personnel of the Infirmary, have been seen and appreciated. We are especially grateful to the medical men who have taught the students.

Two appointments have been made to the school faculty which will be helpful to the patients and to the staff. One of these

appointments is that of Miss Christine McQuarrie, who assumed the position of Operating Room Supervisor on September 11th. Formerly, the chief anæsthetist has supervised both the giving of anæsthetics and the work of the operating room, but the work has now grown to such a degree that this double responsibility is no longer feasible. The other appointment is that of Miss Emma Nelson, who will assume her duties December 1st as assistant to Miss Potter, thus relieving Miss Leach of supervisory work, that she may devote her entire time to instruction. Miss Nelson has had nearly two years' experience with the nursing care of the Nose and Throat.

One school affiliation has been withdrawn and one resumed. The Bath City Hospital withdrew June 1st, and the Waltham School resumed in July, and sent three students. The Melrose Hospital School continues to send one and the Massachusetts General Hospital Training School sends four. At this date there is one post-graduate student. These students are keenly interested, feel that the experience is profitable, and without an exception they are coöperative. They render the hospital an invaluable service.

A great need of the Infirmary is more pupil nurses and more graduate nurses, who have had special training in the care of the Eye, Ear, Nose and Throat.

Anyone visiting the wards here would be convinced that graduate nurses everywhere should know how to care for these patients. With a good foundation in general nursing it is neither a long nor a difficult task to acquire this special nursing technique.

Every superintendent of nurses should think seriously as to whether or not she has discharged her full responsibility when she graduates her students without knowledge of this form of nursing. No graduate should feel satisfied until she is fully competent to care for patients ill with diseases of the Eye, Ear, Nose and Throat; diseases which may impair the most vital functions of the body. This knowledge is especially needed by nurses in the public health field, particularly if working in the schools or in the industries.

POST-GRADUATE TRAINING SCHOOL REPORT

What a force for prevention there would be in Massachusetts if even fifty per cent of her graduate nurses possessed the knowledge which is obtainable in the two months' course given at this hospital.

The responsibility of disseminating the propaganda outlined above should not be left to the training-school faculty alone. Pupil and post-graduate nurses should tell others of the value of their experiences at the Eye and Ear Infirmary. The administration staff should make an effort to interpret this work to the public. No group can make a more important contribution to the upbuilding of the school than the medical staff. In fields inaccessible to others, the medical man can set forth the need for more nurses who are qualified to care for patients having diseases of the Eye, Ear, Nose and Throat and can tell of the preparation for this work which is found at the Massachusetts Charitable Eye and Ear Infirmary.

The first step toward filling a need is to make that need known.

SALLY JOHNSON, R. N.,

Superintendent of Nurses.

Report of the Medical-Social Service Department

October 1, 1922 — October 1, 1923

It is gratifying to realize that the Medical-Social Service Department is being recognized as an integral part of the Infirmary and is being used more and more for the benefit of the individual patient whose condition presents a medical-social problem.

As in the past few years, the work assumed a markedly Public Health phase, hence the necessity for close coöperation with Boards of Health and Public Agencies.

The Department is run upon a strictly non-sectarian basis, and in conjunction with all parts of the Infirmary. Its main functions are:

- First:* To follow up all cases referred from clinic or wards for the purpose of completing the medical treatment.
- Second:* To work in close coöperation with boards of health, public health agencies, etc., in an effort to minimize the so-called social diseases.
- Third:* To act as a means of interpretation between patient and physician, and in this way promote a better understanding of conditions, both medical and social.
- Fourth:* To maintain a high standard of educational work in the homes along the lines of elementary hygiene and common standards of living.
- Fifth:* To work on the basis of prevention of blindness and deafness.
- Sixth:* To arrange for readjustment and education of patients handicapped from eye or ear diseases.

During the year 1,148 new patients were referred to the Department for various types of service, exclusive of Refers, Follow-Up

REPORT OF MEDICAL-SOCIAL SERVICE DEPARTMENT

and of those reported to the Division of the Blind; 501 old patients were carried over from the previous year, thus making the total number of 1,649 persons known to the group of workers.

In addition to the above-mentioned, a large group of patients received some slight service of which no record was kept, while 302 were referred to Public Health nurses for medical supervision in their respective towns or districts. The value of such supervision cannot be overestimated, for it has greatly hastened the recovery of the patients.

Visits to homes numbered 1,389 and 117 visits to agencies were made on behalf of the patients.

Letters numbering 3,996 were sent out, exclusive of the Medical-Follow-Up notifications.

The Department works in close relationship with the Division of the Blind, and reports, after the completion of the medical treatment, low-visioned or blind patients, in order that they may get what is best along the line of education or work so that they may become at least partially, if not wholly, self-supporting. One hundred and eighty-four patients belonging to this class were reported to the above-named organization, said number not being included in the group of 1,148.

The Medical-Follow-Up worker personally steered to the Massachusetts General Hospital clinics those patients referred from the Eye Clinic who needed physical examination or treatment. Patients numbering 1,419 passed through her hands; 9,414 individuals were listed on the Follow-Up, of which 7,516 were carried from the previous year; 1,668 were closed, while 41 were referred for more intensive case work; 1,500 letters or post cards were sent out and 200 visits to homes were made on this group.

General Work

The routine of the General Department was carried by the worker in Gardner Building. This work, owing to its bulk, was largely of the non-intensive type, an arrangement which has not proven wholly satisfactory. The money, so kindly contributed by the Trustees of the Permanent Charity Fund, for convalescent

care, glasses, car-fare, etc., has proven of inestimable value in the completion of both the medical and social treatment of patients in the General, as well as in the Special groups.

Phlyctenular Keratitis

The appointment of a worker for the Phlyctenular Group has made it possible to classify the work under two headings, the Special Group of 78 being carried on a scientific basis in conjunction with the Children's Clinic of the Massachusetts General Hospital, and the General Group of 64 which was handled in the usual case-work manner, while 131 were kept in the non-intensive group, it being impossible to give them more intensive care. Thanks to the courtesy extended by the Boston Nursery for Blind Babies, many children under six years of age were given much needed convalescent care for periods ranging from four weeks to several months.

Interstitial Keratitis

As in the past, the children suffering from Interstitial Keratitis have been kept in one group and the treatment worked out jointly between the South Medical Department of the Massachusetts General Hospital, with most gratifying results; 162 patients belong in this group. Not only have the patients benefited by this method of intensive treatment, but the individual members of their families have had routine Wassermann tests, and when advisable been put under treatment as a preventive measure.

Ophthalmia Neonatorum

Due to the enforcement of the State Law and the coöperation of Public Health Agencies, the number of Ophthalmia Neonatorum or Suppurative Conjunctivitis cases remain low. Sixty-three babies were reported for intensive Social Work. Of this group, 35 were under 14 days old and 28 were over that age: 30 had positive gonococcus smears, 31 were negative, while 2 were question-

REPORT OF MEDICAL-SOCIAL SERVICE DEPARTMENT

able; 15 were illegitimate. In all positive cases, where possible, parents were examined by private physicians or at the Massachusetts General Clinic and put under treatment if necessary. On discharge from Gardner Building, babies were referred back to private physicians, Boards of Health, or to the nearest Baby Welfare Station for supervision of feeding and general condition.

Ward Work

The intensive work done in the wards was confined largely to the patients of the Children's Ward. Close follow-up was given in the homes, and thanks to the interest and coöperation of the Children's Agencies of Boston, many children were given adequate convalescent care. Generous donations of books and magazines have been contributed by thoughtful friends, and the wards were supplied with Christmas trees, greens, toys, etc., while the Flower Mission and private individuals have added greatly to the cheer by frequent gifts of flowers and fruit.

Aural Work

The work of the Aural Department naturally falls into two sections: the General and Deaf groups. The former has been divided, the younger children being carried by the new half-time worker, an arrangement which has made for better work and treatment. As mentioned last year, the greatest need is the equipment of a Nursery or Convalescent Home for young children who are too well to remain in the hospital, and too sick to be returned to their homes. At present no such place exists, and it is an almost superhuman task to find a private boarding place for the little child partially recovered from an acute attack of ear trouble.

A crying need in the Aural Clinic is a Refer and Medical-Follow-Up system of the type now in use in the Ophthalmic Clinic, and it is to be hoped that in the very near future this system may be established, for only in this way can more efficiency result.

Deaf Group

According to custom, all totally or partially deaf children were automatically referred from clinic to the worker in charge of this group.

It is with pleasure we note the fact that a Bill, presented to the Legislature by the Department, under the direction of Dr. D. Harold Walker, asking for the establishment of lip-reading classes for the Hard-of-Hearing children, in the public schools, was incorporated in another Bill presented at the same time by the Commissioner of Education. Said combined Bill passed the Legislature and became effective on August 5, 1923. Under this new arrangement it will now be possible to keep many children at home who otherwise would be sent to boarding schools for the Deaf, and at the same time permit them to mingle with hearing children for at least part of each day. Another great advantage will be that the Hard-of-Hearing child under school age may have a much better chance for education before bad speech habits are formed.

The next step to which we look forward is the formation of a Division of the Deaf, under the State Department of Education, and in conjunction with it a Placement Bureau, for only in this way can the deaf person take his rightful place in the community.

Acknowledgment is made of the splendid coöperation of the Speech Readers' Guild, for it has stood ever ready to help in every possible way any plan presented in the interest of the deaf child.

JESSIE M. C. HUME, R.N.,
Chief Medical-Social Worker.

Report of Pathological Laboratory

During the past year the work of the laboratory has gone on as usual, and many unusual specimens have been added to the Pathological collection. The study of phacoanaphylactic endophthalmitis has been continued, and some of our more recent observations reported before the American Ophthalmological Society by Dr. Lemoine and Dr. McDonald. Dr. Friedenwald has completed and published his work on herpes febrilis, and Dr. Li has published his observations on ring sarcoma of the iris. Dr. Lourie is now studying the subject of bullous keratitis. Dr. Verhoeff has continued his special study of glaucoma, and is now investigating a remarkable case of bilateral massive choroiditis, caused by a fungus probably related to *Actinomyces*, which may throw light on the cause of sympathetic ophthalmia. The material submitted by the Aural and Laryngological Services has consisted chiefly of tumors, chronic inflammatory tissue, tonsils and adenoids. Dr. Finck is investigating polypoid condition of the accessory sinuses.

FREDERICK H. VERHOEFF,
Pathologist.

Report of Ophthalmic Department

During the past year there have been no changes worthy of note in the work of the Ophthalmic Department. The change in length of service from four to six months, with the work of the Ophthalmic Department divided into three services, has been in operation now for about two years and has worked out very satisfactorily.

The work of the Social Service Department is again deserving of great praise. The workers have rendered very efficient aid in keeping track of the phlyctenular and interstitial cases and co-ordinating the work of our clinics with these cases and those of the Massachusetts General Hospital. It is intended during the coming year to pay more attention to following up cases of glaucoma. It is also hoped that work will be taken up again more systematically in connection with cases of tuberculosis of the eye.

A number of the colored charts of Magnus and Liebreich have been framed and hung in one of the clinic rooms. These have proved of great service in teaching.

An effort has been made to improve our methods of taking visual fields. Dr. Goldman has devised a tangent screen for this purpose which has proved very satisfactory.

The instrument for detecting differences in the light sense, designed by Professor Bovie and given to the Infirmary by Mr. M. Douglas Flattery, has been in use during most of the year. A large series of cases, both normal and abnormal, have been tested, and the results are now being tabulated and studied. It is hoped that some definite conclusions concerning the value of this test will soon be available.

ALEXANDER QUACKENBOSS, M.D.,
FRED M. SPALDING, M.D.

Ophthalmic Chiefs of Service.

Report of Aural Department

The record of the past year in the Ear Department has been one of progress.

The establishment of a separate Nose and Throat service, as distinct from the Ear, has, on the whole, worked to the advantage of each department. There is greater opportunity under this system for intensive study of disease. The appointment of an additional House Officer to the previous force has been helpful to the work of the departments, and has provided facilities for training more physicians in the specialties.

The enviable position of this institution as a teaching center is attested both by the men drawn to the House Staff and by the numbers attending the Course for Graduates.

A noteworthy contribution to our knowledge has been the pioneer work of Dr. Leon E. White on Accessory Sinus Disease as a cause of blindness.

For some time the subject of hearing tests has been under discussion by the Staff. There is dissatisfaction with the room employed in making these tests, as it is not sufficiently quiet. Furthermore, it is difficult to secure accurate records of hearing because the instruments at present employed may not give the same reading when used by different observers.

Recently a product of some of the best scientific laboratories in the country has appeared by means of which the entire range of human hearing may be ascertained and registered electrically. This apparatus gives identical results in any given case, although employed by different observers. It is earnestly hoped that as an aid to scientific research the Managers may find some way to place this device at the service of the Infirmary.

EUGENE A. CROCKETT, M.D.,
PHILIP HAMMOND, M.D.,

Aural Chiefs of Service.

Report of the Laryngological Service

The activities of the Throat Department during the past year have been along the lines of the previous year. The number of patients treated and the number of operations in its special field continue to increase. The members of the Staff doing special work have kept up their interest. The House Service is increasing in efficiency.

The X-ray Department continues to give great satisfaction. Visitors to the hospital are especially struck with the great excellence of the plates. A room in series with the other rooms of the X-ray suite has been fitted up for lecture purposes. Here X-ray plates can be exhibited and lantern slides demonstrated. The Friday morning meetings of the Staff and House Officers are held here. Dr. Macmillan uses it also in teaching Post-Graduates.

As was expected, the Fluoroscope has proved of great service in foreign body cases of the Trachea and Bronchi, and of the Esophagus. One or two new points in the physiology of the Esophagus have been discovered through its use. If the machine were installed in a room by itself it could be used without stopping the routine taking of plates, demonstrations could be given to a larger number, and the present crowding about the machine done away with.

Two major changes have been made in the Laryngological Service, a sixth Ear and Throat House Officer has been added, and the Chief of the Laryngological Service has been put on full time. This additional House Officer makes it possible to have all of the three House Officers serving in the Throat Room at a time, men who are fitting for the specialty and with the perspective of the specialty.

The hopes of the founders of the Full-Time Service in Laryngology — the first one in the country — are yet to be fulfilled. The service is feeling its way and has been running only a few months. The aim of the service is to give fuller instructions

REPORT OF THE LARYNGOLOGICAL SERVICE

to the House Officers, to develop Post-Graduate instruction and to stimulate research. Dr. Mosher has lengthened his Post-Graduate Course at the Medical School and now offers it twice a year instead of once. Two Post-Graduate students have presented themselves — one a Belgian sent by the Belgian Relief — for a year's course in Laryngology. These men are to act as Graduate Assistants in the Throat Room. They are to spend two afternoons a week with Dr. Mosher at the Medical School studying anatomy, two with Dr. Finck in the Pathological Laboratory of the Infirmary studying Clinical Pathology, and one morning a week with Dr. Macmillan at the Infirmary studying the Technique of taking X-rays of the head and chest and their interpretation.

HARRIS P. MOSHER, M. D.,
Laryngological Chief of Service.

Report of the X-Ray Department

During the past year 2,590 patients have been referred to the X-ray Department for examination or treatment. This is over seven hundred more than the preceding year. Part of this increase is due to the fact that the patients from the Throat Service of the Massachusetts General Hospital are being referred to this department for examination.

The addition of the fluoroscope to the equipment makes it possible to examine the esophagus and chest cases at this hospital, which adds to the interest of the work being done and makes it possible for members of the Staff to be present at the examination. During the year, 84 patients were examined for pathology or foreign bodies in the esophagus or respiratory tract.

Investigation was started, but is not yet complete, in the X-ray treatment of the various causes of deafness. The reduction in lymphoid overgrowth in the pharynx by radiation promises to be of value in arresting or clearing up the condition.

A. S. MACMILLAN, M.D.,
Roentgenologist.

Scientific Papers Published by the Surgical Staff during the Year 1922-1923

- "Anatomical and Clinical Observations on the Lower End of the Esophagus." By Dr. Harris P. Mosher. Paper was read before the American Laryngological Society at Atlantic City, May, 1923. The paper is now in press for the Transactions of the American Laryngological Society.
- "Blepharochalasis." Drs. F. H. Verhoeff and Jonas S. Friedenwald. *Archives of Ophthalmology*, Vol. 51, No. 6, 1922.
- "Injury to Cornea and Conjunctiva Due to Fish Bile." Drs. F. H. Verhoeff and Jonas S. Friedenwald. *American Journal of Ophthalmology*, November, 1922, Vol. 5, No. 11.
- "A Case of Mesoblastic Leiomyoma of the Iris." Dr. F. H. Verhoeff. *Archives of Ophthalmology*, Vol. 52, No. 2, 1923.
- "Studies in the Virus of Herpes Simplex." Dr. Jonas S. Friedenwald (under directions of Dr. F. H. Verhoeff). *Archives of Ophthalmology*, Vol. 53, No. 2, 1923.
- "Primary Ring Sarcoma of the Iris." Dr. T. M. Li (under direction of Dr. F. H. Verhoeff). *American Journal of Ophthalmology*, July, 1923, Vol. 6, No. 7.
- "Varix of the Vocal Cord, a Commonly Unrecognized Pathological Condition, with Histological Study in Sixteen Cases." By Dr. Calvin B. Faunce. *The Laryngoscope*, September, 1923.
- "An Anatomical and X-ray Study of the Optic Canal in Cases of Optic Nerve Involvement." By Dr. Leon E. White. Transactions American Laryngological, Rhinological, and Otological Society, Inc., 1923. In press for *Boston Medical and Surgical Journal*.
- "The Treatment of Optic Nerve Involvements as Determined by Optic Canal Radiographs." By Dr. Leon E. White. Read before the American Academy Ophthalmology and Oto-Laryngology in Washington, October 16, 1923.
- "Report of Two Cases of Herpes Zoster Oticus with Special Reference to Their Etiology." By Dr. Francis P. Emerson. *Laryngoscope*, August 27, 1923.
- "Chronic Infections of the Upper Respiratory Tract and Their Relation to General Disease." By Dr. Francis P. Emerson. This paper was read before the annual meeting of the Laryngological Society in May, 1923, and is to be published in the transactions of the Society.

MASSACHUSETTS CHARITABLE EYE AND EAR INFIRMARY

- "Removal of Tonsils During the Period of Acute Infection." By Dr. Charles T. Porter. *Boston Medical Journal*, November 18, 1922.
- "Surgery of the Frontal Sinuses, A New Modified Killian." By Dr. Charles T. Porter. Read before the American Laryngological, Rhinological and Otological Society, May, 1923. To appear in the transactions of the Society.
- "Bacterieidal Power of Argerol." By Dr. Robert C. Cheney. August number of *American Journal of Ophthalmology*.
- "A Case of Orbital Abscess Producing a Clinical Picture of Separation of the Retina. Pathological Findings, Including an Anæmic Infarct of the Optic Nerve." By Dr. Robert C. Cheney. *Archives of Ophthalmology*, Vol. LII. Nov. 3, 1923.
- "Mechanical Aids to Hearing." By Dr. D. Harold Walker. Transactions of the Congress of American Physicians and Surgeons.
- During the past year the C. V. Mosby Company, of St. Louis, have published a new edition of "The Tonsils." By Dr. Harry A. Barnes. The subject matter has been thoroughly revised and much new material added.
- "Report of a Case of Carcinoma of the Left Primary Bronchus." By Dr. D. Crosby Greene. To be published in the Transactions of the Annual Meeting of the American Laryngological, Rhinological and Otological Society, Inc.
- "The Presentation of a Theory Explaining a Phase of Tinnitus Aurium." By Dr. Oliver A. Lothrop. *Laryngoscope*, Vol. XXX, 111, August, 1923, No. 8, page 582.
- "Some Pathological Nose and Throat Conditions of Interest to Both Dentists and Rhino-pharyngologists." By Dr. Oliver A. Lothrop. *Boston Medical and Surgical Journal*, Vol. 188, No. 18, May 3, 1923.
- "Three Cases of Asthenopia Treated by Psychotherapy." By Dr. Walter B. Lancaster, Transactions, American Academy of Ophthalmology and Oto-Laryngology — 1922. *American Journal of Ophthalmology*, 1923, Vol. VI.
- "Certain Anatomical and Physiological Considerations Bearing on Heterophoria." By Dr. Walter B. Lancaster, *Southern Medical Journal*, January, 1923.
- "Modern Aids to Cataract Extraction." By Dr. George S. Derby. Section on Ophthalmology, A. M. A., June, 1923, San Francisco.
- "Posterior Transillumination of the Eyeball." By Dr. George S. Derby. American Ophthalmological Society, Colorado Springs, June, 1923.
- "Foreign Body Spud Illuminator." By Dr. W. Holbrook Lowell. Shown at the meeting of the American Ophthalmological Society, June, 1921. *American Journal of Ophthalmology*, October, 1921.

Table of Diseases

Compiled from Records

	HOUSE	OUT- PATIENT
SECTION I		
Specific Infectious Diseases	270	297
SECTION II		
Diseases due to Animal Parasites	4	14
SECTION III		
Diseases of Metabolism	12	11
SECTION IV		
Diseases Peculiar to Infancy	112	128
SECTION V		
Diseases due to Physical Agents	5	52
SECTION VI		
Poisonings, Intoxications	2	1
SECTION VII		
Tumors, Benign and Malignant	279	883
SECTION VIII		
Congenital Malformations	28	13
SECTION IX		
General Injuries and Diseases of Skin and Subcutaneous Tissue	6	15
SECTION X		
Special Skin Diseases	21	364
SECTION XI		
Diseases of the Circulatory System	17	59
SECTION XII		
Diseases of the Lymphatic System	29	15
SECTION XIII		
Diseases of the Blood	2	1
SECTION XIV		
Diseases of the Ductless Glands	3	7
SECTION XV		
Diseases of the Nervous System	79	144

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	HOUSE	OUT- PATIENT
SECTION XVI		
Diseases of the Bones, Muscles, Tendons, and Facia . . .	47	18
SECTION XVII		
Diseases and Injuries of the Eye and Ear:		
Diseases of the Eye	2,853	33,123
A. General	302	19,216
B. Lids	103	2,115
C. Lacrimal Apparatus	94	502
D. Conjunctiva	143	4,262
E. Cornea	472	3,372
F. Anterior Chamber	34	33
G. Sclera	21	95
H. Lens	1,011	1,084
J. Uveal Tract	16	33
1. Iris	124	328
2. Ciliary Body	12	17
3. Choroid	17	153
K. Retina	31	154
L. Vitreous	37	169
M. Optic Nerve	56	290
N. Eyeball	133	259
O. Orbit	17	12
P. Disturbances of Motion	230	1,029
Diseases of the Ear	797	10,269
Q. General		44
R. Auricle	39	44
S. External Auditory Canal	29	3,418
V. Middle Ear and Mastoid	720	6,756
W. Internal Ear	9	7
SECTION XVIII		
Diseases of the Nose and Accessory Sinuses	879	900
SECTION XIX		
Diseases of the Mouth, Lips, Cheeks, Pharynx, Tonsils, and Palate	2,743	1,695
SECTION XX		
Diseases of the Jaw, Teeth, and Gums	46	64
SECTION XXI		
Diseases of the Tongue	2	
SECTION XXII		
Diseases of the Esophagus	43	25

TABLE OF DISEASES

	HOUSE	OUT- PATIENT
SECTION XXIII		
Diseases of the Stomach	1	
SECTION XXIV		
Diseases of the Intestines	2	
SECTION XXV		
Diseases of the Liver and Gall Ducts	1	2
SECTION XXVII		
Diseases of the Abdomen and Peritoneum in General . .	3	
SECTION XXIX		
Diseases of the Larynx	21	11
SECTION XXX		
Diseases of the Trachea and Bronchi	17	4
SECTION XXXI		
Diseases of the Lungs	2	
SECTION XXXII		
Diseases of the Pleura and Mediastium	6	
SECTION XXXIII		
Diseases of the Kidney and Ureter	8	1
SECTION XXXV		
Diseases of the Urethra (Male and Female)	2	
SECTION XXXVI		
Diseases of the Male Generative Organs	5	
SECTION XXXVII		
Diseases of the Female Generative Organs	2	
SECTION XXXVIII		
Puerperal State	1	
SECTION XLI		
Ill-Defined or Unclassified Diseases	42	730
Totals	8,392	48,846

Form of a Bequest to the Infirmary

*I give and bequeath to the Massachusetts
Charitable Eye and Ear Infirmary of Boston,
the sum of dollars, to be applied to
the uses of said Infirmary.*

